

THE
CHILD
AND HIS
WELFARE

BY
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DEDICATED TO
MARY IRENE ATKINSON
WHO LEFT US
A CHALLENGE TO
WORK FOR THE WELFARE
OF ALL CHILDREN

PREFACE

THE chief purpose of this book is to give a broad view of the field of child welfare and to suggest approaches for the worker in this field. It is designed primarily for the use of college and university students, but an effort also has been made to adapt it to the general reader who desires information.

As author I do not assume that I have covered fully any portion of the field or that I have enunciated final principles. Progress in guiding children to effective adult life demands constant evaluation and re-evaluation. We cannot say that this is THE way, but only that it is a way that we think will help children to achieve a happier life.

This book has no special chapter about children of minority groups, for it is my belief that all services and opportunities promoting health, education and *welfare* should be of equal access to children in all stations of life regardless of race, creed or color. We must not overlook, of course, that children of minority groups often meet conditions which place them at a cruel disadvantage; we must recognize that what brings about a happy, wholesome life for one group of children can do the same for others, and we must work toward providing it for all.

In preparing the manuscript, I have been helped by an unusually large number of generous people, and to them I wish to express my deep appreciation:

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PART ONE: *The Child and His Welfare*

I

THE FIELD OF CHILD WELFARE

The General Situation: We who give thought to society are trying to build a better world, one free from war, poverty, famine, ignorance, and prejudice, one with leadership for better, happier living. To whom will we look for future leadership? We depend upon that one third of the population who are now children under eighteen. From that third must come the country's future leaders. With that in mind it is necessary to scrutinize carefully the provisions made for the welfare of all the nation's children, and the relationships of these children to the world's children. Certainly this is sound, for we know that the nature of these future leaders will be influenced by their training and environment during childhood. So, even as the child is the country's greatest asset, his welfare should be the country's greatest interest.

The term "child welfare" has an accordion-like quality. To some people it means a narrowed scope of activity, as, for instance, child placement; but to workers in this field it means stretching out to embrace every aspect of the child's life that concerns his growth and proper development. That means the child's physical health, his social, his intellectual, and his emotional growth.

In considering the welfare of a child we realize that when services from persons other than his own parents are necessary something has happened in his life which, unless skillfully handled, may leave lasting scars. Some of the reasons which make it necessary for a person outside the home to offer understanding and help to a child seem quite obvious: for instance when a child is deprived of his own home because of the death, disability, incompetency, or illness (physical or mental) of one or both parents; or when a child is without normal guardianship of parents—abandoned, neglected, deserted, or born out of wedlock. His home may be broken because of economic pressures, unemployment, marital disharmony or other family discord. Reasons less obvious but extremely damaging to the development of the child include situations where parental personalities affect the welfare of the child. In these cases children coming from the homes of the well-to-do are as susceptible to tensions and home discords as are the children of parents in low-income status. The child who is rejected by one or both parents is an example.

He may develop anxieties and inferiorities making it difficult for him to enter into easy social relationships. The child who experiences deprivation of emotional security in his own home may demand excessive attention; may be unable to bear disappointment without being sulky or having a tantrum. If the child has been overprotected, his parents never giving him a chance to cope with disappointment, he will be totally unprepared to meet the frustrations of later life.

There is also the child who suffers because he is a foil for an unsatisfactory marital partner; and the child who is a rival either of the marital partner or of the parent of his own sex who envies the child's youth, opportunities, or enjoyment. The influence of sibling rivalry may also create serious problems.

These and other influences on the mechanism of a child's personality formation are of great importance in determining his future adaptation to life.

Each child must be helped to accept his own responsibility for making something useful of his or her life. The health, educational, recreational, social, and economic resources, in addition to the emotional stability which are present in his immediate environment, all play parts in his growth and development. We find child-welfare problems directly related to employment, wages, housing, and other factors affecting family life. We also find that if a child has the affection and security of his family he may survive serious social and economic deprivations surprisingly well.

To the schools, of course, we largely leave the educational training, but we must always consider the school situation in relation to the other aspects of child welfare. We are concerned with all conditions under which all children of a nation live and grow to maturity either successfully or unsuccessfully. When anything less than the best in child welfare is present in any individual case, the whole community suffers.

Purpose of This Book: It is the purpose of this book

- to define the field of child welfare;
- to set forth some basic principles of child-welfare work;
- to show in several chapters how child-welfare work evolved to its present status;
- to discuss, in detail, programs and the role of child-welfare workers in relation to the child in his own home, the child as a ward, and the child under various forms of foster care;
- to look at the problems presented by the child of unmarried parents, and by the exceptional child; and finally;
- to show by example, for rural and urban areas, how child-welfare

services are provided through well-rounded programs of public and private agencies.

The welfare of children is secured through their relationship with other human beings, largely through the medium of social institutions. The institutions of prime importance for the child's welfare are the family and the organizations that fulfill some of the customary functions of the family when the family fails or is unable to carry out its responsibilities. These organizations include foster families, child-caring institutions, and financial assistance agencies; they also include other institutions that provide health services and opportunities for recreational education, spiritual guidance, and social relationships.

A sound child-welfare program will involve consideration of and provision for all factors that will enable children to develop useful lives—useful to themselves and to society as a whole. The extent to which a community is considering its own future is shown by the kind of provision it makes for the welfare of children of all creeds, colors, races, and nationalities, without regard to financial or social status of the parents.

Why Specialization Is Needed: Specialized services for children are required because certain factors make work with children different from work with adults. Adults find it difficult enough to adjust to one another; children have to adjust to a world controlled, not by their own age group, but by adults, and this while the child himself lacks the advantage of maturity.

The young are in the process of growth and development, and their own conceptions may be quite at variance with those of their elders'. Yet the will of the adult prevails. During their early years children do not have the freedom to determine where or with whom they will live, or where and with whom they will play or go to school. These things are decided for them.

The adult who needs help from a social agency applies for this help. Children, in almost every instance, are referred to the agency by some adult. They may resist this adult interest in their welfare although they may be unable to express their feelings in words. They may have to struggle with adults who lack the understanding needed to help them develop.

It has become increasingly apparent that maladjustment in adults is frequently traceable to unhappy childhood experience. Certainly society will gain when our adult population will have had the benefits afforded by a childhood spent in an environment of understanding. Without some grounding in what science has thus far discovered about human beings

and why they behave as they do, intelligent planning for children is impossible. The child-welfare worker should set for herself as her first goal, understanding of the child and the role he plays in his family.

Since the social group is, in essence, an enlarged family, the basic relationships he develops within the family may be reflected in the response of the child to his later life experiences, such as, for example, authority relationships.

One cannot give in a few brief sentences a formula for the child-welfare worker to follow in each type of problem with which she may be confronted. No standard prescription can be written to be filled by the worker as to the best method of interpreting her program to the community. Having a certain amount of skill and knowledge does not necessarily mean that she can immediately solve all the difficult casework situations, or problems of community interpretation and integration assigned to her. Even the best equipped worker, under adequate supervision, cannot become a cure-all for every problem of delinquency, neglect, unhappiness, and maladjustment in children.

There are, however, certain basic conditions that may be considered in all situations.

Most child-welfare workers now take as a matter of course their task of fostering and encouraging the strength that a parent displays when he decides to do something about his child's problem. If the parent wishes to refer his child to a clinic, the worker may: 1. try to prepare the child for psychotherapy by discussing with the parent how he will present to the child the plan for coming to the clinic, 2. seek to maintain the parent's interest in the child's treatment by: a) accepting the ambivalence of the parent's desires, b) helping him to decide what he most wants to do about the child's problem, c) discussing with him what the psychiatrist is discovering about the child's problem.

This may lead to a discussion of a parent's own emotional conflicts and may result in the improvement of the parent's own mental health. This, however, is not the main objective. Its principal aim is to help the parent work out a problem in social relationships valuable for the child. Work with the parent and the role of the child-welfare worker differ from place to place depending on the patient's needs, the psychiatrist's point of view, and the theoretical conception of where the child worker fits into the pattern.

A child-welfare worker must know what a request for a placement of the child means to the parent and to the child. She must be able to evaluate the strength and nature of the emotional tie between them. In order

to minimize the negative aspects of placement, the parent's participation in the placement must be used to the limit to which he is able to take over this responsibility. The child-welfare worker must also have a recognition of the role that foster parents play in any placement situation. Even though foster parents, by offering their homes, may be meeting some of their own needs, the worker should not overlook the fact that they are primarily meeting the need of the agency. These foster parents often have to be helped in their concepts of what constitute a "bad" parent, as well as their own role as a substitute parent. She must remember that foster parents are people—not perfect, not always objective—and that they assume great responsibility for very meager returns. A worker's real skill may be shown in keeping the triangular relationship of foster parent, child, and parent well balanced.

It is essential that a child-welfare worker know that certain types of behavior may be quite normal for a child in various stages of his development. In the light of this knowledge, it may be necessary for her to re-evaluate some of her own ideas and attitudes as to what constitutes acceptable behavior. Feelings of anger, shock, or disgust then give way to understanding and the worker is able to deal with problems in a matter-of-fact manner. She, too, may also have to revise her opinion of what constitutes a "bad" parent. A critical feeling toward the parent may prevent her from doing constructive work with child or parent.

The child-welfare worker must feel at ease with children. She must develop skill in interviewing children and helping the child to reveal himself. Many adults feel self conscious about being drawn into a behavior web that is normal for a child. They are afraid of "losing face" and, because of this uneasiness, have a tendency to push the child into a discussion of his problem. A child, like an adult, has a right to tell his story in his own way, and the worker must let the child assume responsibility for doing this.

A child may try to make the worker a replica of a father or mother person and act out all of his aggressions; or he may try to reduce her to the role of a person younger than himself so he can assume control of the situation. The worker must realize that the child has to have this freedom to project his guilt or hostility and she must hold steady through the child's struggles, defining the boundaries of action while at the same time helping the child to achieve freedom of feeling.

The child-welfare worker will need to remember that casework is a method in itself, but through the use of psychiatric consultation, it makes full use of psychiatric knowledge and experience. The psychiatrist does

not attempt to teach casework therapy. The caseworker has to take psychiatric consultation and translate it into social work concepts and her own method of therapy.

Information about community facilities and treatment resources which may be used will not only be of service in evaluating the adequacy of community programs in relation to children's needs, but will give the child-welfare worker insight into personalities and attitudes which to a great extent influence the course of community action.

A dearth of community resources may leave the worker confused as to her areas of responsibility. The need may be so great and the demands upon her services so pressing that she may tend to spread her activities too thin over a broad range of needs. In answer to this situation she might first determine her principal duties and responsibilities to her agency, then in what particular areas of community child welfare are special services required, and what specialized knowledge and techniques does she have to offer and how can these be co-ordinated with existing activities.

In taking stock of her potentialities for community organization, the child-welfare worker may be keenly aware of her limitations. She is not an executive or a director, nor does she hold the purse strings; but she can take definite responsibility for promoting a planning group charged with responsibility for reviewing conditions affecting children and for assisting in clarifying their thinking and helping them decide what they want for children.

Sound community planning must be based on factual data rather than opinion. The child-welfare worker may assist in gathering factual data through conducting small surveys of her own or by stimulating other groups to undertake large studies. In working with these various groups the child-welfare worker acts as adviser and consultant. Her role is a supportive one, in which she shares her professional knowledge with others.

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BASIC FACTORS IN CHILD WELFARE

Certain basic factors underlie all child-welfare work. These are:

Enlightened Parenthood: Parents should be fully prepared in advance for the responsibility of parenthood. Counseling and guidance programs, including sex instruction, should be accessible to parents of all economic groups in all communities.

Conserving and Strengthening of Home Life: This is first in importance for the child's security, growth, development and education. There is no satisfactory substitute for a child's own home with two present parents and for the self-respect which comes to a child from knowing that he, or she, is loved for himself alone, rather than for what he can do, or how he looks. Children should not be deprived of their parents merely because of their parents' emotional instability if this be treatable. If, because of death or incurable unfitness of the parents, a natural home life is not possible, a foster home should be sought which will give the child as nearly normal a home life as possible.

Promotion of Physical and Mental Health Facilities, at Public Expense if Necessary: This is of the highest importance for protection and rehabilitation of children and family members. The facilities should include pre-marital consultation services; prenatal clinics for the expectant mother throughout her pregnancy; care at delivery and after the baby is born; medical supervision of well babies and young children, with periodic health examinations; well-trained pediatricians; immunization against and control of communicable diseases; enforcement of sanitation laws and regulations; good nutrition, adequate hospital care, and outpatient service; public health nursing services; mental-hygiene and child-guidance clinics.

Economic Security: A basic factor in providing the child with a feeling of security is adequate provision in his home of the material necessities of life. This means an income sufficient to provide adequate food, clothing, and shelter. If a child is born into an economically deprived home, or if unemployment, death of the breadwinner, illness or other incapacity reduces the family income, adequate supplementation of income from public funds should be provided to conserve home life and make the child's opportunities comparable to those of children in more fortunate circumstances.

Religion: Religious ideals and concepts should be taught to every child in conformity with his background and individual needs. These can give him a sense of the intrinsic worth of the individual and the value of human fellowship. Each child needs to have a personal appreciation of ethical values consistent with a developing philosophy of life. Non-conformity in religious matters forced upon children by parents can have rather serious psychological effects.

Education: There should be an opportunity for education commensurate with the individual capacity, needs, and interests of every child, and reassuring encouragement to persist in learning. The impulse to learn in order to gain self-sufficiency, and to ease anxiety, is a positive innate tendency, so the denial or lack of opportunity to learn may produce frustration and emotional disturbance. All children should have the advantage of well-constructed school buildings that are properly lighted, heated, and ventilated; attractive school grounds with suitable play equipment for the different age groups; competent teachers who understand the importance of the child as an individual; an educational system equipped to integrate the "special" child into the general school population, except in extreme cases where institutional care offers the best solution; adequate and nutritious school lunches available to pupils of all income groups; sound educational and vocational guidance programs.

Play Time: Every child should have a chance to play and to pursue intellectual and physical interests which will stimulate growth and give him a feeling of adequacy and self-sufficiency. There should be an opportunity for activities with groups other than his own family. An opportunity for early participation in group activities is important.

The child should be guided to use leisure time constructively: learn to develop hobbies; to participate actively in sports, thus spending less time as a spectator only.

Freedom from Injurious Exploitation: Every child should be protected from exploitation in premature and harmful labor. Federal and state governments have enacted child-labor laws to safeguard children against employment that damages or interferes with health, recreation, and education. Such laws should be enforced.

Special Services for Children with Special Needs: Children born out of wedlock need special legal and social safeguards if they are to have opportunities equal to those of other children.

Children of working mothers need a co-ordinated program of day-care

services. This includes day nurseries for the young and child-care centers for older children. There should be counseling service for the mothers.

Children who are crippled, blind, or visually handicapped, deaf or hard of hearing, mentally deficient or suffering from tuberculosis, rheumatic fever, cardiac or parasitic diseases all should have opportunity for care and treatment. The purpose should be to enable them to compensate for their handicap and, to the greatest extent feasible, gain assurance and take their place in society.

Children presenting personality and behavior disorders need early identification and treatment, plus extra help in adjustment if they are labeled delinquents.

Children in minority groups need special consideration when they suffer from low incomes, inferior dwellings or inadequate educational facilities that fall to the lot of these groups.

Children in depressed areas require the special help necessary to insure proper education, health, recreational and cultural facilities.

Those who apply these principles should do so on the basis of the physical, mental, and emotional needs of the particular children concerned and should always bear in mind that these needs are interrelated.

It is obvious that successful application of these factors calls for the extreme skill of specialists. More and more communities are coming to recognize this, and are turning to competent child-welfare workers to aid in the promotion and advancement of children's well-being. They expect to find in such workers, because of their special training, an understanding of children and of the ways of dealing with the difficulties of the child.

It is a field that holds rich interest and gratification, for the child-welfare worker is concerned with the substance of life and of living. Opportunity for constructive work is abundant. To enjoy success in the work, those who engage in it, must have integrity, stability, and belief in the potentialities for honest endeavor that lie in every individual.

In order to perform the task satisfactorily, she must also have completed certain academic requirements. Two years of graduate study in one of the recognized schools of social work, which gives special emphasis to the field of child welfare, are necessary.

The child-welfare worker is, in most cases, attached to a local public or private agency. As such she is a leader in the program for child welfare in the community. She studies the problems of the child who is referred to her by the schools or by the police, the juvenile court, the

neighbors, or the child's family. She must determine, in consultation with others, what the child needs and see whether arrangements can be made to meet his needs at home, at school, in a foster home, a children's institution or a hospital. Her work is directed mainly toward understanding and interpreting the child's problems.

What are the child's needs and what are the underlying forces which motivate his behavior? The child's behavior, whether consciously or unconsciously determined, represents an attempt on his part to find a solution for his needs. Through her interpretation of the child's problems to the community the child-welfare worker makes possible the intelligent consideration of his difficulties.

The worker also helps in planning for the utilization of whatever resources the community affords and in securing and developing new resources to meet the needs of children.

If a child-welfare program is to succeed, it must have community understanding and support and whatever legislation is necessary for its sound functioning. There must be child-welfare agencies to give protective services to children in their own homes and those under substitute parental care in foster homes and institutions, and to promote high standards of care for all children.

How the Child-Welfare Worker Prepares for the Task Ahead: We assume that a child-welfare worker goes into her job armed with a background of knowledge concerning the development of private services and public services, both at state and local levels; has acquired sound basic concepts of social casework plus knowledge and special skills needed to perform the functions inherent in a child-welfare program.

She will need to know something of the resources and the pressures of cultural patterns of the area in which she is to work, for these will, in a large measure, determine program direction. Much of a child's behavior is conditioned by cultural traditions and beliefs. The cultural influences must be known to understand sufficiently the individual and his patterns of adjustment. Child-welfare workers must understand the group dynamics as related to the individual, but must not lose sight of other influences and so "lay the blame" to "cultural conflicts."

Whether it is the environmental influences which contribute to the child's problem or the emotional attitudes of the parents toward him and the lack of secure affection which he finds in family life, the treatment responsibility rests with the child-welfare worker. Social casework embodies the most comprehensive approach to an understanding of the child in his total life situation.

In the treatment of the individual child, past emphasis has been mainly on determining the needs of the child and trying to meet these through an improvement of the child's life situation. This might involve modification of the attitudes of adults close to the child, provision of opportunities for satisfying experiences, and sometimes even removal of a child to a new and more favorable environment. The child-welfare worker will realize that a child's behavior may be measured in terms of social values and mores which the community understands and accepts. It is therefore important and necessary to have understanding of the significance of special kinds of environmental influences as these might affect the child's behavior and relationships, before his behavior can be interpreted and his real needs or problems recognized so that services may be planned to meet them.

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PART TWO: *History*

3

EVOLUTION OF CHILD-WELFARE WORK

Poor-Law Antecedents: In order to understand present-day conditions in the field of child-welfare work, it is first necessary to scan briefly the development of various forms of child care.

This cannot be outlined in a simple way because a variety of plans of assistance to children developed concurrently.

An historical survey of the provision of funds and facilities for the care of children, either in or out of their own homes, shows a gradual realization that the child and the community are vitally interrelated, and whatever affects the child inevitably affects the group.

We know that ancient codes frequently recognized society's obligation to destitute and dependent children and provided some sort of care for them. A thorough study of such codes handed down by religious and fraternal orders of Asia, Europe, and the Near East would show, probably, some definitely developed philosophy in regard to provision for homeless and neglected children. It is sufficient for our purpose, however, to center our attention on early English practices, since these practices influenced so greatly the development of child care in this country.

Statutes Enacted Under Elizabeth: It was not until 1601, the forty-third year of Elizabeth's reign, that the earliest known English law providing for the care of children (the famous Elizabethan Aet) was devised. This law set a precedent for modern states by defining responsibility for certain classes of children.

Under this and subsequent statutes, various provisions were made for the care of children who were homeless, whose parents were destitute, or children who were grossly mistreated or neglected.

Viewed in the light of present day standards, the varieties of care provided by this and other early laws were callous and rudimentary; however, the state aid offered was at least a step in the right direction.

To supplement the tax-supported programs in England—and this was true also in the United States in the early days—numerous sorts of private philanthropies developed, some under religious auspices, some supported by fraternal orders or foundations, and others financed by private subscriptions. Thus a complicated body of social institutions, designed

For material giving detailed accounts, see footnotes and bibliography.

to meet the minimum needs of children who lacked families or whose families could not support them, existed long before social work with children came into being.

American Heritage: The Elizabethan system of child care was taken to America by the first settlers and soon gained a strong foothold in the early colonies. Even though the settlers were venturesome enough to chop out woods, turn sod, and start fresh enterprises in a new country, they remained rank conservatives concerning the laws and social institutions they had carried with them from England.

The earliest record of colonial notice of a dependent child in America is that of Benjamin Eaton, who in 1636 was indentured for fourteen years, by the Governor of Plymouth Colony, to Bridget Fuller, a widow.* The child's age at the time of indenture is not given: presumably, since indenture was usually until the age of twenty-one, he was about seven.

Another example of indenture was recorded in the township of Leicester, Massachusetts, in 1747.† In this, the selectmen of the township, acting as guardians for a minor child, Moses Love, two years and eight months of age, bound him to Matthew Scott by an indenture contract until the age of twenty-one.

An example of the indenture of a girl is drawn from Virginia records of 1686. The girl, Mary Polly, was "bound out" by her father, Samuel Polly, to work for John Porter for ten years. In return she was to receive food, clothing, lodging, and at the end of her indenture three barrels of corn, one suit of peniston (coarse woven wool cloth named for the town of Penistone, England), one suit of good serge, one black hood, two "shifts of dowlas" (suits of coarse linen under-garments), and "shoes and hose convenient." John Porter agreed to "use and maintain ye sd Mary no other ways than he doth his own in all things," and Mary was to obey John Porter "in all his lawful commands within ye sd term of years."‡

These examples illustrate the type of care, if care it can be called, provided by the colonies for homeless, destitute, and neglected children. Early colonists, such as the Puritans and Quakers, regarded idleness as a sin and believed work a necessary part of child training. Since it was considered especially important to teach these children thrift, so that

*Kelso, Robert W., *History of Public Poor Relief in Massachusetts, 1620-1920*. Boston, Mass. 1922. p. 165.

†*New England Historical and Genealogical Register*. Boston, Mass. 1880. Vol. XXXIV. p. 311.

‡Bruce, Philip Alexander, *Economic History of Virginia in the Seventeenth Century*. New York. 1896. Vol. II. p. 2. Quoted from the Records of Henrico County 1677-1692, p. 425, Virginia State Library.

they would not be a financial burden on the town or county, laws (of which the New Plymouth Act, 1641, is an example) were promptly enacted for indenture of child dependents. In all colonies dependent children were indentured by local township, city, or county poor authorities. Laws for indenture still stand unrepealed in some states, but are seldom used.*

INDENTURE AND OUTDOOR RELIEF

In spite of the grave disadvantages and hazards of pledging the work of a child as pay for his keep and a minimum education, indenture did remove the need for begging on the streets and sleeping under boxes. It provided some sort of private home and must have given, at least to some of the children involved, a feeling of belongingness and a certain amount of security as to regular food, shelter, and clothing. It is reasonable to suppose that some of the employers were just and kindly, treating their indentured wards as foster sons or daughters. However, early records of inspections indicate that generally children were put to work at as early an age as possible and worked hard and long to recompense the employer for their keep. Indenture was always in theory a business contract through which the employers expected to receive from the child a full equivalent in work for the expense of his care.

Not all dependent children in the early colonies were indentured. Some "outdoor relief" was given to dependent families. Not infrequently, moreover, the care of dependent families or children was awarded at auction under the poor law method of "public vendue." If there were several bidders, the local poor officials gave the contract to the one offering care at the lowest figure.

ALMSHOUSE CARE AUTHORIZED

In England, beginning in 1697, a plan developed of authorizing almshouse care for dependent children. In that year an almshouse, called a "workhouse," was built at Bristol, and thereafter almshouses were built in practically every parish. They housed adult derelicts, the aged or diseased, and dependent children who were not indentured.

In the American colonies the first almshouses were built in 1700 at New York, Philadelphia and Boston, and the practice spread as other towns grew in size. Into these almshouses the dependent children were herded with the aged and with the feeble-minded, the insane, the depraved, perverted and diseased. Here they suffered from inadequate diet

*Abbott, Grace, *The Child and the State*. University of Chicago Press. Chicago, Ill. 1938. Vol. I. pp. 189-225.

and lack of sanitation, and were deprived of education and all normal experience of family life. Yet for more than a century almshouse care was considered the best and most economical method of care for dependent children, especially when it provided opportunities for work.

In 1824, under the direction of J. V. N. Yates, Secretary of State in New York, a survey was made of the condition of paupers in New York State.* His report to the legislature† condemned outdoor relief and waxed enthusiastic over the possibilities of almshouse care. It stated that "the poor when farmed out or sold are frequently treated with barbarity and neglect by their keepers . . . The education and morals of children of paupers (except in almshouses) are almost wholly neglected." The report recommended that every county in New York State be required to maintain a poorhouse and declared that every overseer of the poor had the right to commit "any child under the age of fifteen, who shall be permitted to beg or solicit charity from door to door or in any street or highway—there to be kept and employed and instructed in such useful labor as he or she shall be able to perform." If a child was discharged from the poorhouse at an age when he could make a useful apprentice, he could still be indentured.

There were, however, voices of criticism, and in 1857 a committee of the New York Senate investigated the condition of children in almshouses. They found "at least 1,300 children now inmates of the various poorhouses, exclusive of those in New York and Kings Counties . . . common domestic animals are usually more humanely provided for than the paupers in some of these institutions.‡

Blows were struck at the system in 1875 by Charles A. Hoyt, first secretary of the State Board of Charities (organized in 1867) of New York State, and William Pryor Letchworth of Buffalo, a member of the State Board of Charities, a man of wealth who had given up his business to devote himself to social service. After visits to all the almshouses of the state§ these two men succeeded in getting a law passed providing that, effective January 1, 1876, "no child over three and under sixteen years of age, of proper intelligence, and suited for family care, shall be com-

* *Annual Report of the State Board of Charities of New York*, 1900, in which is reprinted the *Yates Report of 1824*. pp. 951-952.

† "Report and Other Papers on the Subject of Laws for Relief and Settlement of Poor." *Assembly Journal*, January, 1824. Appendix B. pp. 289-299.

‡ For more detailed accounts, see: *Select Documents*. University of Chicago Press, Chicago, Ill. 1938. Breckinridge, Sophonisba, *New York Document No. 8, 1857*. "Public Welfare Administration in the United States." p. 154.

§ *Annual Report of State Board of Charities of New York*, 1868. pp. 76-78.

mitted to any poorhouse of this state, and that all children of this class, shall . . . be removed from such poorhouses.”*

Dissatisfaction with care of children in almshouses, stimulated a country-wide development of other state and local public institutions, and a number of states granted subsidies to private organizations to care for children removed from almshouses. Yet the census of 1923[†] revealed thousands of children still cared for in county poor farms in the United States. There has been no recent national survey of the county poor farm population to show how many children are now living in such institutions.

ORPHAN ASYLUMS

One form of care which very early was found superior to the almshouse was the orphanages established by religious groups, charitable societies and certain public bodies. These institutions were created to meet the needs of large numbers of children who were orphaned by wars, and by epidemics. Orphans of this nature were often the sons and daughters, not of ne'er-do-well parents, but of substantial citizens of the community, and the need of caring for them brought the disgraceful conditions of the almshouses to public attention. Orphanages, as institutions solely for children, at least kept them from being herded with adults. However, the early orphanages with their congregate type of care gave little thought to the individual needs of children. Moreover the young were made to devote long hours to work, with little or no time for education or play.

By the end of the eighteenth century four institutions for dependent children had been established in the United States. The first private orphanage was set up in 1727 at the Ursuline Convent in New Orleans and later used as a refuge for orphans after the Natchez Indian Massacre of 1729. In 1738 the Bethesda Orphanage was established in Savannah, Georgia, by George Whitfield, an English clergyman, one of the founders of Methodism. The first separate public institution or orphanage was established in 1790 in Charleston, South Carolina.[‡] St. Joseph's Orphanage was established in Philadelphia in 1798. These institutions had more to offer in the way of cleanliness and comfort than the mixed almshouse and were a forward step in child care.

The New York City Orphanage, incorporated in 1807, was the first

*Birdseye, Cumming and Gilbert, *Consolidated Laws of New York*, 1909. Vol. 4, p. 4256, with reference to Laws of 1875, Chapter 173, Paragraph 152.

[†]"Children Under Institutional Care," Table 2, pp. 18-19. *United States Census Report*, 1923.

[‡]Abbott, Grace, *The Child and the State*. p. 29. Refers to George B. Eckhard's *Digest*, published in Charleston, S. C., 1844. pp. 188-189.

privately run children's institution of any kind to receive a legislative grant. This grant was made in 1811. The precedent it set has dominated the child-welfare programs of some states ever since. Public subsidies were at first lump-sum appropriations. Later, subsidies were generally paid on a monthly per capita basis; however, even now, in some states, public funds are granted to private institutions in lump sums.

Fraternal orders began somewhat later to undertake the care of dependent children. The first institution established for this purpose by a fraternal order was organized by the Masons in California in 1850. The Jewish Orphan Asylum of the Independent Order of B'nai B'rith was founded in New Orleans in 1855.

The number of orphanages supported by public funds was never large. By the beginning of the twentieth century private funds had preempted the institution field and private orphanages and institutions were increasing. Even so they could care for relatively few children, and indenture, outdoor relief, and almshouses still existed as methods of care for dependent children. Most orphanages were denominational. Some of the others were for special groups such as infants, and the orphans of Negroes, of soldiers, and of sailors. Following the war between the states there was great interest in the construction of Soldiers' Orphans' Homes, and this plan would have been revived following World War I but for the far-sightedness of some national leaders of the American Legion.

Among early institutions to provide care for children outside the almshouses were three established to aid the physically and mentally handicapped. They were the Institution for the Deaf, at Hartford, Connecticut, founded in 1817; the Perkins Institution for the Blind in Boston, Massachusetts, 1832; and the Institution of the Feeble Minded in Waverley, Massachusetts, 1848.

COUNTY HOMES

In Ohio a law was passed in 1866 permitting counties to establish separate institutions known as county homes. This state eventually acquired fifty-six such homes. Connecticut and Indiana also established state-wide systems of county homes. In a number of other states public institutions were created in counties or cities, but local care was more often provided by private institutions receiving public funds. Michigan in 1874 opened an institution known as a State Public School,* and this plan was followed by several other states.†

*The age of admission was over four and under sixteen. The child had to be capable of receiving instruction.

†Iowa, 1863; Indiana, 1865; Connecticut, 1867; Illinois and Ohio, 1869; Pennsylvania, 1895.

FOSTER HOME PLACEMENT

A further development in the move away from almshouses was the initiation of foster home placement. Under this, an institution placed a child for care in a private home without the conditions of indenture.

Foster home placement may be said to have begun with the New York Children's Aid Society, founded by Charles Loring Brace in 1853.* This agency specialized in placing children who were deserted, homeless, or in great poverty. It sent them under care of one of its agents to other parts of New York State and to cities in the Middle West, whence from a public gathering place they were distributed to farmers or townsmen who might select them. Several years later in 1860, the Henry Watson Children's Aid Society was organized in Baltimore; it operated on similar lines. Other child-placing societies were organized in Boston, Brooklyn, Philadelphia, and Hartford. These societies were, for the most part privately financed.

The State of Massachusetts in 1866 saw the launching of two plans for placing children in private homes and paying for their board while there. Under one of these, the State Board of Charities paid board for foster care of children above infant age. Under the other, the Boston Children's Aid Society, a private agency, paid board in foster homes for temporary care of children with behavior problems.* The State Board in the same year, and the private agency in 1883, employed a "traveling visitor" to supervise what the aid society called "placed-out children."†

Indiana in 1897 set up a state child-placing agency using free, wage, and adoptive homes. The Rhode Island State Home for Dependent Children in 1912 began to place children in boarding homes as well as in free homes. In 1913 state child-placing was initiated in Ohio to supplement the work of county children's homes and agencies; the state agency received the guardianship of only such children as could not be provided for by local agencies.

STATE "CHILDREN'S HOME SOCIETIES"

State-wide organizations known as "Children's Home Societies" fostered by the Protestant Church under the leadership of Martin Van Buren Van Arsdale began in Illinois in 1883. In 1885 the title was changed to the National Children's Home Society, and the board of this agency began to grant charters to agencies in other states to do child placing in free foster homes. Iowa was the first of the original ten states

*Thurston, Henry, *The Dependent Child*. pp. 174-175.

†op. cit., p. 177.

to receive a charter. By 1916 there were thirty-six state societies in the national organization.* They were called State Societies, not because they were publicly financed, but because they had state-wide coverage. For many years these agencies received and placed children with little knowledge or investigation of the child or the foster home.†

By 1897, when Wisconsin took out a separate charter, a general movement was under way by state societies to break loose from the administrative control of the national society and to regard this organization as a federation of individual state societies for an exchange of ideas and services.

Notable changes were made in the years between 1930 and 1939 in the soldiers' orphans' homes in Ohio, Illinois and Indiana through the use of social service in connection with intake and provision for varied forms of child placing. After the Indiana Public Welfare Law of 1935 went into effect, the Children's Division of the State Public Welfare Department continued to supervise children who had been placed by the old agency, but transferred children as rapidly as practicable to county welfare departments that became equipped to give the necessary service.

Care of children and to some extent concepts of child welfare have since been altered in the United States because of a number of factors. Among these are the increased awareness of public responsibility—local, state, and federal if need be—for the welfare of children; and an increased recognition of the value of social security and general relief as preservers of healthful home situations.

*Thurston, Henry, *The Dependent Child*. pp. 149-150.

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4

NATIONAL INTEREST IN THE NEEDS OF CHILDREN

Development of child care in the United States since Colonial days has been marked by very slow but actual progress. We have improved and extended our programs to meet the changing demands of the times. No longer do we indenture or send to the poorhouse those children whose parents cannot support them; nor do we auction off the care of the needy to the lowest bidder, as was done a century ago. Instead, we provide public Aid to Dependent Children to keep them in their homes. Many orphanages have become schools or homes, with programs designed to give their child residents an opportunity for individual development. Welfare programs, which a few generations ago were hardly more than the dreams of a few theorists, are now an accepted part of our way of life.

Since early in the present century the attention of the whole nation has been focused upon the problems of child care through the holding of a series of national child-welfare conferences at Washington, called together by Presidents of the United States.

WHITE HOUSE CONFERENCE—1909

The first White House Conference, convoked in 1909 by President Theodore Roosevelt, dealt mainly with the problems of the *dependent* child. Its keynote was something that all child-welfare workers will do well to remember. It was:

Home life is the highest and finest product of civilization. Children should not be deprived of it except for urgent and compelling reasons.

Fifteen recommendations were voiced by this conference; some of the more important can be paraphrased as follows:

children should not be taken away from their homes by reason of poverty alone;

causes of dependency should be studied and as far as possible removed or minimized;

foster homes provide the most desirable care for those removed from their homes;

when care at an institution is necessary, the cottage plan is recommended;

all child-caring agencies should be under state approval and inspection;

a children's bureau should be created by the federal government to investigate and report upon all phases of child life and welfare.

The first recommendation included the thought that private charity was to be preferred over public relief as the means of keeping children in their homes. This, though, was not unanimous, but was adopted because many feared public funds would tend to be administered in an atmosphere of politics.

A first outgrowth of the White House Conference was the "Mothers' Pension Law" known as the "Funds to Parents Act,"* adopted by Illinois in 1911. It based itself upon the principal recommendation that "children should not be taken away from their homes by reason of poverty alone," but it broke with the method advocated: assistance through private charity. This measure was the first state law to provide that the dependent child should be kept in the home by payments out of public funds.

Following the example of Illinois, other states rapidly enacted laws providing for public aid for dependent children in their own homes. By 1934 all the states (except Georgia and South Carolina), the District of Columbia, and the territories had enacted legislation of this type. The laws in the different states were variously known as "widows' pensions," "mothers' pensions" and "mothers' assistance" acts; but they all held in common the conviction that it was valid use of public money to invest it to permit mothers to continue care of their children in their own homes. Eventually this principle was developed on a federal-state basis and incorporated into the Social Security Act of 1935 as Aid to Dependent Children.

The second and most outstanding result of the first White House Conference was the birth of the United States Children's Bureau. It was the first public agency in the world whose function it was to consider as a whole the conditions, problems, and welfare of children, and to develop a staff and service of nation-wide coverage.

LEADERS BEHIND CHILDREN'S BUREAU

Creation of the Children's Bureau was first suggested by Lillian D. Wald, head of the Nurses' Settlement and founder of Henry Street Settlement in New York City. She broached the idea to President Theodore Roosevelt in 1906. Mrs. Florence Kelly, then secretary of the National Consumers' League, drew up the first statement of the Bureau's proposed work.

*Abbott, Grace, *The Child and the State*. Vol. II, pp. 229-230. University of Chicago Press. Chicago, Ill. 1938.

The National Child Labor Committee at the request of the Consumers' League undertook a campaign for the establishment of the Bureau. Many other influential persons and organizations joined in this campaign. This interest and support led to the introduction of several bills, beginning in 1906. Six years later, the sixty-second Congress passed one of these measures, sponsored by Senator William E. Borah. The bill was signed by President William Howard Taft on April 9, 1912, and was effective immediately.

The stated reason for establishing the Children's Bureau was "to have a central office where facts of child life may be collected, reviewed, and interpreted to individuals and organized groups, thus making possible intelligent action and reducing needless experimentation."

When Congress passed the measure, it directed the Bureau "to investigate and report . . . upon all matters pertaining to the welfare of children and child life among all classes of our people."

To these functions, a later Congress added a *third*—the *administration* of certain federal laws affecting child welfare. Under this directive the Bureau administered, as time went on, the first Federal Child Labor Law (1917-1918); the Federal Maternity and Infancy Act (1922-1929); the Maternal and Child Welfare provisions of the Federal Social Security Act (1935) and the act for Emergency Maternal and Infant Care (1942).

When first established the Federal Children's Bureau was a part of the Department of Commerce and Labor. In 1913, at the time of the creation of the United States Department of Labor, the Bureau was transferred to that department. There it remained until July 1946 when, as a result of President's Reorganization Plan No. 2, all of the functions of the Bureau except those relating to child labor under the Fair Labor Standards Act were transferred to the Federal Security Agency.

Each of the chiefs of the United States Children's Bureau held office for a considerable period. Miss Julia Lathrop, 1912-1921; Miss Grace Abbott, 1921-1934; Miss Katharine F. Lenroot, the third appointee, began her service in 1934.

CHILD WELFARE LEAGUE OF AMERICA

The first White House Conference, recognizing that many private agencies existed in the children's field, recommended the creation of an unofficial national organization for the promotion of child care. In pursuit of this objective the Child Welfare League of America was organized at Baltimore in 1915. In 1928, it was incorporated under the laws of the State of New York.

There were only eighteen persons at the conference that established the League. In June 1945, the membership was about one hundred eighty-nine organizations, two hundred seventy-three affiliates, and seventy-eight branch offices. Members included "children's aid societies"; institutions; state and county and local welfare departments; child protective agencies; day nurseries; and certain other agencies having direct or indirect responsibility for the protection and foster care of dependent and neglected children.

The League purposes to develop standards of service for child protection and care in children's agencies and institutions and in community programs.

Membership is granted on the basis of standards of care and protection of children and is, therefore, certification of child-welfare standards. The membership comprises private Protestant, Catholic, Jewish, and non-sectarian agencies, as well as public children's organizations that are supported by states, counties, and cities. Idaho, Nevada, and Wyoming are the only states in which there is no participation of any kind. It is estimated that every year some 350,000 children are affected through the League organization.

The Children's Bureau, itself an outgrowth of the first White House Conference, has sponsored three additional White House Conferences for Child Welfare, held in 1919, 1930 and 1940.

WHITE HOUSE CONFERENCE—1919

The second White House Conference was called by President Woodrow Wilson in May 1919 after World War I. The year 1919 was designated by the President as Children's Year, and he made a special allotment of \$150,000 from his War Emergency Fund for the Children's Year activities. Emphasis was placed on a study of standards for child welfare, health and education, and measures to be taken for their improvement. Eight regional conferences were held as preliminaries, and at the White House Conference guests from England, France, Belgium, Japan, Serbia, and Italy took part in discussion.

Out of this conference came minimum standards for the "Protection of Children in Need of Special Care"; for "Children Entering Employment," and for the "Health of Children and Mothers." Two new notes were added to the enunciated principles:

"home life cannot be provided except on a basis of adequate family income;

"each state needs to give careful consideration at reasonable intervals to its child-welfare legislation."

Before this White House Conference only eight states had established child hygiene or child-welfare divisions. Today every state has such a division.

WHITE HOUSE CONFERENCE—1930

In November 1930, the Third White House Conference on Child Health and Protection was held in Washington. It was called in 1929 by President Herbert Hoover and was preceded by sixteen months of work by approximately 3,000 men and women in the fields of education, medical, and social welfare. The Conference, attended by these people, was organized in four sections:

- Medical Service;
- Public Health Service and Administration;
- Education and Training;
- The Handicapped Child.

The reports presented showed that the standards built up slowly and patiently through the years were finding their expression in legislation and practice. At the closing session a Children's Charter with nineteen points was adopted which embodied the rights of all children regardless of race, color, location, or situation.

As a result of discussions during and following this Conference the parts of the present Social Security Act dealing with children—Aid to Dependent Children, Crippled Children, Maternal and Child Health, and Child Welfare Services—were written.

WHITE HOUSE CONFERENCE—1940

In harmony with the plan of having a White House Conference each decade, President Franklin D. Roosevelt issued a call on April 26, 1939, for the fourth White House Conference. This was held in Washington, D. C., January 18-20, 1940. Frances Perkins, at that time Secretary of Labor, was chairman and Katharine Lenroot, secretary. A planning committee of seventy-two persons was chosen, together with small sub-committees. The general subject was "Children in a Democracy." Sections devoted themselves to:

- Economic Aid to Families;
- The Family as the Threshold of Democracy;
- Social Services for Children;
- Religion and Children in a Democracy;
- Child Labor and Youth Employment;
- Health and Medical Care for Children;
- Children in Minority Groups;
- Education through the School;
- Child Development through Play and Recreation.

Every section of this Conference recognized that any step taken in a community to co-ordinate economy and social problems in relation to the whole population necessarily has an effect upon every child in the whole community. VII:7:7 70

Recommendations of the Conference* form a program of action for the welfare of all children. They cover all phases of child life and involve primarily the expansion and improvement of already existing activities for children. They are concerned with legislation, administration, co-ordination, education, research, and changes in attitude. 51944.

*See Final Report. "White House Conference on Children in a Democracy." *United States Children's Bureau Publication No. 272*. Government Printing Office, Washington, D. C. 1942.

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5

MEETING THE NEEDS

A survey of the development of child-welfare services during the past forty years shows a growing realization that there must be planning on a national as well as on state and local levels. There has been gradual acceptance of public aid for child-welfare purposes, and, partly because of this, there has been a growth of various child-welfare movements and of federal legislation culminating in the Social Security Act.

It is now recognized that each community is responsible for the welfare of its people; but that the smaller units of government should be able to call for assistance from the larger governmental units, state and federal, in planning and co-ordinating services to children.

Some of the services for children are provided through a combination of federal, state and local funds. Services are administered through either public or private agencies. Overall planning is done to determine the needs, how these can be met and how the gaps in existing programs can be filled. This planning provides for the co-ordination of the various services available and delegates the administration of services to the proper agency.

Goals for programs for youth have been set by several agencies. Goals adopted by the National Commission on Children in Wartime, 1945, list ten ways "to realize the full promise of better and richer democratic life." These are repeated here:

1. safeguard family life;
2. extend health services and medical care until they reach all mothers and children;
3. assure to youth education and employment opportunity and protection;
4. develop community recreation and leisure-time services for young people;
5. assure social services to every child whose home conditions or individual difficulties require special attention;
6. review and revise legislative safeguards and standards relating to children;
7. enable federal, state and local governments to share the public responsibility for the health, education and welfare of children;
8. train professional personnel and prepare volunteers to render services to children and youth;

9. provide increased opportunities for youth to share in the planning and development of programs for youth;
10. educate parents, youth, and all citizens in the importance of providing full security and opportunity for children for the sake of their own happiness and well-being and for the future of the Nation.

The Children's Bureau Commission on Children in Wartime (later called the National Commission on Children in Wartime), organized in February 1942 by representatives of public and private agencies and lay interests to meet the wartime needs of children, made recommendations with regard to the setting of standards for program and administration of child-welfare services. These were similar to, but less detailed than, recommendations on the same subjects by the White House Conference of 1940.

The latter Conference recommended enlargement of governmental units administering programs of health, education, and welfare so that some might be dispensed with and the rest operated with greater economy and efficiency. Merit systems for all personnel in child-welfare services were recommended for local, state and federal administrations.

NATIONAL COMMISSION ON CHILDREN AND YOUTH

The National Commission on Children in Wartime was succeeded by the National Commission on Children and Youth. This latter Commission held its first meeting in December of 1946. The sixty members of the Commission invited representatives of state commissions on child welfare and state councils for children and youth. They also invited staff members of the United States Children's Bureau and other government advisers to meet with them. The members of the conference felt that they were in complete agreement on goals set in past conferences and decided to devote this conference primarily to plans for attaining these goals. They adopted an eleven-point action program. It urges expansion of the federal-state co-operative program to make child-welfare and health services available within ten years to every child. The action program also includes: extension of social security, improvement of state laws on adoption, guardianship, illegitimacy, and juvenile delinquency; expansion of mental health programs for children; recreational opportunities; international programs for youth.

The Commission recommended that a 1950 White House Conference be held. It will be held in Washington, D. C., in December 1950, and the theme will be *the child in his family and community*. Another resolution called for a countrywide study of personnel shortages in the field of youth

services. Members were urged to work for legislation providing health services to children through joint action by school and public health authorities.

Adequate child-welfare services were formerly considered the responsibility of the local communities in order to bring them closer to the consumer. This need for national interest was accentuated in the checkup on draftees of World War II, where it was found that many of the men in service had lacked opportunities for education and health services.

NATIONAL PLANNING

Because there exists a wide divergence in the financial resources of the various states, federal aid in financing child-welfare programs on the basis of need rather than the amount of financial participation by the state, has been strongly advocated. This is a goal that has not yet been reached.

Federal participation in child-welfare programs now includes among other things: the setting of standards; publication of information regarding child welfare; research concerning the extent and variety of needs and methods of providing services; consultation service for agencies administering and developing child-welfare services, including demonstrations of particular services or methods of administering services.

The United States Children's Bureau since its founding in 1912 has continued to spearhead activities for child welfare throughout the country in research, demonstrations, publication of studies and reports, setting of standards, and its consultation services for public and private agencies.

The transferring of the Children's Bureau in 1946 from the Department of Labor to the Federal Security Agency was intended to bring it in closer contact with the other programs of the Federal Security Agency designed to promote the health, education, security and welfare of the people in the United States, and hence make possible a closer integration of children's services. It was decided to keep it intact as a Bureau, within the operating branch of the Security Agency known as the Social Security Administration, because this had the advantage of retaining a specialized agency charged with the responsibility for promoting all of the interests of children. It is widely recognized that specialization leads to greater efficiency in the discharge of a specialized function. It is also realized that specialized functions must be integrated with other functions to be most effective in promoting a common objective.

The lack of an "organizational orbit" among the several federal gov-

ernmental units has impeded the smooth flow of existing child services to the local community. The result, when coupled with weaknesses in state and local administration, is a decided lack of services to children in many areas throughout the country.

A bill for the creation of a Cabinet department of health, education and security, offered to the eightieth Congress in 1947, called for a wider co-ordination of welfare services, including child services, under one administrator than had existed in Washington before. Doubts were immediately expressed: Would the programs already developed by federal agencies be thereby augmented and improved? What policies would be developed to govern the proposed department's activities? Under what conditions would existing agencies be willing to work in an integrated administrative unit?

Supporters, however, were quick to see that the creation of the proposed department would greatly assist the future development of welfare programs including child welfare, since it would help streamline the administrative relationship between national and state governments in the welfare field. A Cabinet department, it was declared, could do much to develop and co-ordinate research, improve the administration of social insurance, put grants-in-aid to the states on a more effective basis, and co-ordinate the services dealing with child welfare, health, education and recreation so as to make them equally available in all areas and to all children.

National planning in the realm of child care has helped to establish some widely held principles. One of these is that the functions of health, education, recreation and welfare services should be administered by professionals in these fields, who should be capable of giving strong leadership and of developing services.

STATE PLANNING

State planning for child welfare must take into account both federal and community planning, since, on the one hand, funds and advisory services can be obtained from the federal government and, on the other, the local communities are where the children live and where their needs are known. The state is responsible for establishing standards of child-welfare services state-wide in scope; providing leadership in developing state and local services for children; helping with funds, when necessary, to establish specialized programs which local units cannot provide; and for supervising both public and private programs of child care.

States have used more than one type of organization for administering

and co-ordinating services for children and in planning and developing new, needed services. However, the trend has been toward unification of all public welfare services in a single department of welfare, with divisions for the various services.

Function of a Welfare Board: Many a state department of social welfare is headed by a welfare board, which is an advisory and policy-making body of five or seven unsalaried members appointed by the Governor for rotating four year terms. Members are selected for their demonstrated interest and leadership in social welfare activities. Meetings are held monthly. The Governor also appoints, with the approval of the state welfare board, the director of the department of social welfare. In theory, at least, the director is selected on the basis of his training, experience and ability in social welfare administration.

The activities of a well conducted division of child welfare in a state department of social welfare are closely co-ordinated with those of other divisions. The division's staff should include caseworkers with special skills in child welfare who can work with administrators and others in the local community.

State planning, of itself and in relation to nation-wide planning, has been fostered by a number of groups, including child-welfare legislative commissions. The first such commission began work in Ohio in 1911. Later, other state committees were organized to follow up the recommendations made by the 1930 and 1940 White House Conferences on Child Welfare. During World War II, nearly every state delegated the responsibility for state planning to a particular group—a state planning committee, a special committee on the state defense council or a special state youth commission which included services for children and youth. Regardless of title, such committees were and are, in most cases, concerned with the problem of meeting the needs for child welfare. Since 1940, practically all the states have had White House Conference committees or defense council committees.

Non-governmental bodies that have reviewed child-welfare legislation and planned for children's services have been committees of state conferences of social work, and other organizations concerned with health, education, housing, recreation, and other specialized fields.

State planning boards in some states have extended the scope of their services beyond the development of physical resources, to include social planning in the fields of health, education, and welfare.

These trends indicate an increasing acceptance, by the state, of its responsibility for the welfare of its citizens and the cognizance of plan-

ning boards that the welfare of children should not be separated from that of the population in general.

In most cases, the responsibility for state planning for children has not been co-ordinated, but has been divided among many departments and committees. In fact, the division of planning on the state governmental level may be compared to similar distribution of planning for children on the federal level.

The following opinions have gained wide acceptance: *state legislation for and administration of child welfare should be reviewed periodically* to determine whether they are meeting needs, whether financial provisions are adequate, whether the administrative practices are effective, and whether there is need of revision of the law and of other changes.

It is important that state and local planning groups function together. It is through the local body that services are usually administered, but the legal authority and, to a large extent, finances, are usually administered through the state government; hence the state has a responsibility to assist the local community in the organization of its services.

It is wise to create a state committee for child welfare. This may be organized, under a law, as part of the state planning board. If so, it should be directly responsible to the legislature, which authorizes it.

Where such a committee is not established by the state, it may be organized on a volunteer basis. In this case its members should have enough prestige to obtain the active co-operation of state officials and the legislature.

A voluntary committee has often been the precursor of an official state committee for child welfare. Whether or not this is the case, the voluntary organization can help materially to integrate services and fill existing gaps in both urban and rural areas. Equally important, it can become an excellent means of interpreting services for children and youth to the public, through the participation of volunteers; this will serve to promote co-ordination between state and county, and public and private, agencies and elevate standards for services.

COMMUNITY PLANNING

It has been well said that the area to be covered in community planning depends upon the "habits of association of the community under consideration and the governmental units responsible for services for children." The area may be county, city, town, or village and surrounding farms.

The advantage of using the county as the planning area is that the

county agencies are usually the channel for programs of the state and federal governments, and that certain functions in regard to children have already been delegated to the county government and county welfare department. In counties containing large cities this is probably not necessary, for in counties of this kind there are, usually, councils of social agencies or city planning boards that concern themselves actively with child care needs.

Whether the area covered is city, town or county, in planning for children the planning group should be a permanent organization—in the sense of having a continuous job to do rather than in the sense of its personnel. It may be under public auspices and financed from public funds, or it may be financed by private funds through the Community Chest. In either case it has the responsibility of reviewing existing services, developing other services which may be needed, and integrating services to prevent overlapping and to eliminate gaps.

The agencies and groups which may be included in the planning body of the community or its committees may differ, but they usually represent the various aspects of community life. Those usually included are: social welfare and public health organizations, schools, family, and child-welfare agencies, juvenile court, racial groups, church groups, libraries, youth agencies, recreation department, labor groups, parent-teacher associations, civic clubs, and the county extension service. The many interests represented provide channels through which local child-welfare needs and services may be reported and interpreted as a basis for community action.

The planning committee in any community may ask for studies of agencies in order to bring their practices up to date, to integrate services, to prevent overlapping and needless expenditure of funds, and to raise the standards of agencies concerned with child welfare. These studies may be made by a special committee or experts in the fields of welfare or education may be called upon.

It is imperative that community planning committees keep aware of two things, constantly and simultaneously: the immediate problems that need to be solved and long-time objectives. Only in that way can an even better program for child welfare be evolved.

Community plans should be developed in relationship to the state planning group for children.

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6

HOW VARIOUS AGENCIES CONTRIBUTE TO CHILD WELFARE

Public and private agencies, while both originally organized to meet needs in the community, differ in many respects. Public agencies were set up, in most instances, for dispensing relief and establishing institutional care for special cases held necessitous by the public; while private agencies were designed to fill an existing need as defined by voluntary groups.

RELATIONSHIP OF PUBLIC AND PRIVATE AGENCIES

The public agency works within the framework of responsibilities delegated to it by the law or executive order that brought it into being. Its authority is specific and its field is usually wider than that of the private agency. Because it represents collective action through government, the voters are theoretically the ultimate controlling group. The agency may or may not have an unpaid administrative board or an advisory board.

The private agency, on the other hand, organized in the first instance by a group of private volunteers need not be bound by certain rules and regulations that restrict public agencies. Therefore, potentially it has greater flexibility. An unpaid voluntary board is the group responsible to the community for the work of the private agency. If the agency is supported by Community Chest funds, the board may be immediately responsible to the Chest. The private agency is usually supported entirely by private funds, but many agencies receive public funds for specific services.

Standards of private agencies serving children have been improved, but are not universally high; they range from poor to excellent.

In many instances, private agencies can learn much from the high quality of work done by public agencies. A number of private agencies in the child-welfare field are studying and re-evaluating their functions in the light of the responsibility now carried by public agencies as well as the unmet needs which the private groups might fill by changing their policies. It is traditional to think of the private agency as the spearhead in developing new techniques for serving the community, in entering the undeveloped and experimental areas of activity in behalf of children. It

has, in many instances, been willing to give up to the public agency responsibilities which the public agency can administer.

The relationship of public and private agencies can be clarified through social planning on a community-wide basis through a frank evaluation of the policies of each agency with a resultant determination of the division of responsibility. It is particularly necessary to clarify the respective functions of both types of agencies operating in a given area in order to insure that needed services are being provided and that they complement, not duplicate, each other, and to insure a variety of services to meet changing needs.

In communities where private agencies give short-time care and refer long-time care cases to public agencies, there is frequently no agreement as to the dividing line between these two types of cases; nor is there a clear distinction that applies generally. In some communities, short-time care is defined in terms of nine months to one year, while in others it may be defined in terms of the problem and the type of service needed. In even a long-term case, a private agency may be willing to provide, for a short time, those services which it may be peculiarly fitted to supply.

THE PUBLIC CHILD-WELFARE AGENCY

It is essential that existing public child-welfare services be available to every child in need of help. They should be extended without the necessity of establishing eligibility and without a court commitment—except where legal action is necessary for change of guardianship or custody or because of the child's delinquency.

In nearly every community, the public child-welfare services are provided by a county welfare department; occasionally, however, some or all of them may be furnished by the public welfare department of a large city. The services extend beyond the administration of the Aid to Dependent Children program and include responsibility for all essential services to children, either directly or through utilization of resources of other agencies.

Services of a local public child-welfare agency on either the county or city level usually need to be interpreted to the people of the community because many of the services are new, and because in many areas the concept of public welfare is the traditional one of haphazard administration of inadequate relief.

The quality and extent of the services in a local public agency depend not only on the social standards of the community but, to a great degree, on how well the executive and staff can administer services and

enable the public to understand and use the service and finance the development of new ones.

THE PRIVATE CHILD-WELFARE AGENCY

In many communities the function of a private children's agency is often interpreted as synonymous with child placing only, and the misconception is spread that all children served by the agency are, or will be, placed in foster homes. Actually, the primary role of a children's agency is not to place children but to assist parents to deal with a child and their own problems in relation to the situation in their home. The assistance may take the form of information regarding community resources, financial aid, or help in meeting needs of which the parents may not have been aware when they approached the agency.

During the past few years there has been a trend toward merging the services of family agencies and children's agencies into a single agency. This is probably due to the recognition that many of the requests for placement which come to a children's agency spring from some difficulty in the family situation and that the real need is not placement but help with family problems. Since there is a danger in mergers of making the surviving agency too large, unwieldy and inflexible, owing to its multiplicity of functions and its complex administrative structure, it is essential for the agency periodically to evaluate its services to the client and the community. It is possible to have such a complicated administrative structure, with so many inflexible and impersonal rules and regulations, as to obscure the reality of serving the client on the basis of his need. To prevent such an outcome in the case of the child, it is wise for the agency to keep its child services headed by workers trained in this field.

Some merged agencies have staff members on all board committees, and have the staff attend board meetings, in order to keep policies and administrative procedures in line with the primary function—service to human beings. Policies and procedures, whether initiated by board or staff, are discussed also at staff meetings. In such an arrangement, too, there lurks a danger—that of possible friction between staff and board.

The board represents the people in the community who believe in the need for the agency and are willing to support and guide its work; it is therefore charged with the responsibility of determining policies and procedures—and in this it looks to the staff for practical advice. If, however, the staff attending board meetings permits itself to overstep its advisory role, the board may find itself in an awkward position. It may feel that the staff's wishes are not at the moment compatible with the

community's needs or desires, and in that case it is forced to the choice of overriding the staff or becoming mere "yes" men and watching the agency get out of step.

The administration of any agency must realize that it has an inherent responsibility to co-ordinate its services with those of other agencies in the community in order to give the best service possible, and that it has an obligation to share in community organization for child welfare and social welfare.

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PART THREE: *Safeguarding Family Life*

7

FINANCIAL AIDS FOR MAINTAINING A CHILD IN HIS OWN HOME

Many think of child-welfare work as the processes employed when a child lacks a home of his own. This is not enough. We must learn that child-welfare work, in the broadest sense, should operate primarily in the home. Increasingly, we must concern ourselves with problems of those millions of children who are living with their own families under conditions thwarting their health, educational, and emotional development. When the home fails, becomes inadequate, or breaks down, the child becomes a casualty. Economic and social hazards which threaten family security are matters of very real concern to all who are interested in a child-welfare program.

Our first consideration in safeguarding family life is the financial aspect. When we emphasize the maintenance of the family way of life for children we also emphasize the fact that family life is dependent upon stable employment and adequate income to provide ideals of clean, decent, orderly living.

In events that disrupt or break the usual course of family life, human needs must be met despite illness, unemployment, accidents, death, child-birth and other crises when some or all members of the family may suffer either temporary or permanent injury or impairment. The family will be broken or weakened unless aided to meet these difficulties.

When parents are assured the essentials of life—food, clothing, shelter—we can expect them to be better able to supply the necessary emotional and psychological values of wholesome family life.

This need for family security does not change, no matter how the world may change. But as the world changes, there are changes, too, in the ways in which family security is maintained.

CHANGES IN AMERICAN ECONOMY

In the early days of our American settlement, pioneer families supplied most of their material needs directly by the produce of their own hands. Today our economy is too complex for that. We more or less specialize and look to others to create most of what we use. All of us are dependent on money both for daily necessities and for future security

in the form of savings; but, too often, forces beyond our control make it impossible to earn enough money to supply immediate needs, much less to save anything for a rainy day.

Most men, moreover, now work away from their homes, and they are joined in this by a large segment of the women, including wives and mothers. This makes it more difficult for families to give their children adequate care and limits the opportunities for development of a feeling of family solidarity.

For many years the majority of American people seemed to get along pretty well without giving much thought to the enormous changes taking place about us in our very homes and in our own ways of living. There were many, to be sure, who suffered from want and poverty even in good times; but the country was expanding, work was fairly plentiful, and opportunity—or so we thought—was any man's for the taking. Our "security" was not very well planned—or even very secure—but as long as times were not too bad we did nothing about setting up a more systematic plan of protection.

With the depression of 1929, we reaped the bitter harvest of this shortsightedness. People everywhere began to realize that some of the existing conditions which were bringing suffering to tens of millions and fear to all, were not a sudden development but the result of the far-reaching changes that we had ignored. And when the American people as a whole awakened to the fact that these conditions were likely to continue even after the emergency was met, we decided that something had to be done. We began to demand that the federal government co-operate with its states and communities in setting up permanent safeguards against some of the most widespread hazards of present-day life.

SOCIAL SECURITY ACT

If we are to protect all the children of the world, it is necessary to insure every family that these basic essentials will be met in order that economic conditions will not thwart the maintenance of a child in his own home. The Social Security Act is a step in this direction. The Social Security Act was passed by Congress in 1935 and became effective early in 1936. All of the measures included in this Act have a tremendous effect upon the security of family life and, therefore, are in their broad aspects, child-welfare measures.

The Act broadened the scope of aid to dependent children in their own homes so that greatly increased numbers of children could be cared for by their own kin. By protecting the family from starvation during

periods of unemployment, it provided for children an additional element of security and stability. Further, through a system of aid for the aged, it relieved many parents of the burden of support of their own parents and thus put them in a position to provide more adequately for their own children.

It is important to recognize that all of the Act's provisions relating to children are in complete harmony with the most important pronouncement of the first White House Conference in 1909, which declared home life to be "the highest and finest product of civilization" and the conservation of the child's own home to be "the chief aim of child-welfare work."

Aid to Dependent Children: Aid to Dependent Children, one of the three categories of public assistance established by the Social Security Act, is contained in Title IV of this Act.

A dependent child is defined as "a needy child under the age of sixteen, or under the age of eighteen, if found by the state agency to be regularly attending school, who has been deprived of parental support or care, by reason of the death, continued absence from the home, or physical or mental incapacity of a parent, and who is living with his father, mother, grandmother, grandfather, brother, sister, stepfather, stepmother, stepbrother, stepsister, uncle, or aunt, in a place of residence maintained by one or more of such relatives as their own home."^{*}

In order to get federal Aid for Dependent Children, each state is required to set up a plan, approved by the Social Security Administration, for the administration of that aid.

The plan must provide for proper methods of operation, including merit systems for all personnel administering it, and for suitable reports by the state agency to the Social Security Administration. The plan must be put into operation in all subdivisions of the state. Most of the states require that a dependent child must have lived in the state for a certain length of time, usually for a year, in order to get this assistance. If the child is less than a year old, his mother may be required to have lived in the state during the year before the birth. No child can be refused aid because he has not lived long enough in a particular town or county. Income and resources available for the care of the child must be taken into account in determining need; there must be provision for fair hearings by the state agency and for the protection of information concerning applicants for aid. The Social Security Administration may, after

^{*}*Compilation of the Social Security Laws.* U. S. Social Security Board. 1944. p. 29.

giving notice, discontinue federal payments if at any time the state plan or the manner of administration has been changed and no longer meets the Act's requirements.

The federal payments to the states for Aid for Dependent Children are made quarterly. Payments to recipients must be made in cash.

Originally the Act provided for federal contributions of one third of the money—not exceeding a federal share of \$18.00 for the first child and \$12.00 for each succeeding child in a family—disbursed by the states to children who qualified under the dependent children definition. In 1939 the Act was amended to increase the federal contribution to one half; and a like increase was made for participation of federal funds in the actual costs of administering the funds by the states and counties.

In 1946 the Social Security Act was again amended to provide for new federal matching. Effective October 1946 and through December 31, 1947 the federal share in Aid to Dependent Children became:

For the first child in the family—two thirds of the first \$9.00 of the total monthly payment and one half of the balance, up to an overall maximum federal share of \$13.50;

for each additional child in the family—a \$9.00 federal maximum.

In August of 1946, forty-seven states, the District of Columbia and the Territories of Hawaii and Alaska had approved plans in operation. Nevada alone among the states had none. In 1945, three states granted Aid to Dependent Children up to the age of eighteen without the requirement of school attendance, and three states required no prior residence. In August of 1946, 318,571 families with 816,886 dependent children received aid totalling \$17,225,000. The average grant per child for the month was \$21.09.*

The fact that Title IV, of the Social Security Act is termed Public Assistance and that Aid to Dependent Children is administered by the Bureau of Public Assistance along with Aid to the Needy Blind and Old Age Assistance has tended to restrict the total amount of aid granted to needy children. In almost every state, the Needy Blind and Old Age Assistance programs receive far larger budgets than those allotted to Dependent Children. From this it would appear that the rate-setters find it easier for people to put themselves in the place of the aged or the blind than in that of needy children and the families who care for them. Besides, children do not have votes.

This Title specifically states its purpose of maintaining the child in his own home and yet most unrealistically establishes maximum on

**Social Security Administration Bulletin*, Oct. 8, 1946.

federal matching of payments which, in fact, tends to make states set the same maximum instead of meeting actual need. Old Age Assistance and Aid to the Needy Blind has a maximum in individual payments. In Aid to Dependent Children, the payment is also a maximum per child but usually includes the parent or parents or relatives responsible for care. Social Security Administration has placed emphasis on the needs of the child rather than the parent.

THE CHILD AS A MEMBER OF THE FAMILY UNIT

The physical and social development of children is deeply imbedded within the family group and their needs can hardly be considered apart from the needs of the family as a whole. Therefore, since most of the families need assistance beyond the individual needs of the child, agencies have begun to consider the needs of the child on the basis of the family unit.

There are wide variations as to the type of aid they grant. However, in many cases the Federal-and-State Aid to Dependent Children grant is supplemented with general assistance and with special services which the county may provide. The danger here lies in the fact that the standards of Aid to Dependent Children, or the standards for which the agencies are aiming, may be lowered to those of general assistance and prove far from adequate.

Whether general assistance is involved or not, the interests of the child may be lost in the administrative consideration of eligibility of the other members of the family. In cases where some member of the family is employed, his earnings are usually counted, with some deductions for essential personal needs. It is a matter of individual casework to decide cases in which the child may have a job also without incurring loss of aid. An illustration would be the case of Mrs. R.:

"Mrs. R. writes that her oldest boy, aged fifteen, earned good wages this summer and that, '... it looks like if we are cared for all winter we should help out while we can, but he is too young to understand and has threatened to run away if I take his money.'"^{*}
Most agencies allow the children to keep their earnings, to be used as they or the family sees fit.

The granting of Aid to Dependent Children immediately brought forth the old arguments quite usually heard when public funds for aid are to be distributed. At such times there are efforts to establish some

^{*}Pope, Miley M. "Thirty Years in Review—1913-1943," *California's Children*. Vol. VI, No. 4. Sacramento, Calif. California Department of Social Welfare, 1943. p. 32.

overall standards that will assure the communities that the money is going to the "right" places. So when Aid to Dependent Children programs were launched, it was often asked whether a child's home was a "suitable" or "proper" place and whether his parents or guardians were "fit" or "proper" people. What a family may mean to a child, and the ability of each parent to care for his child, are a very individual matter, and because of this factor of individuality the terms "suitable" and "proper" are as yet undefined.

Although there is no mention of such terms in Title IV, the local agencies and the states in their administration used old concepts of standards set for mothers' aid with which they were familiar. Either by legislation or by practice, twenty-four of the states administering Aid to Dependent Children have standards of health and decency as the minimum requirements.* Illinois, for example, states in Section Three of its law that "... it shall be the duty of the State and County Welfare departments to take into consideration the suitability of the home in relation to the standards of care and health.†

Fortunately, along with the recognition of the needs of the entire family, there has also been a liberalizing of set standards for homes. In many cases "suitability" will become a fact only after economic aid is granted. The physical environs such as crowded conditions, which in many cases cannot be avoided, have receded in importance as deterrents to aid and are being replaced by an emphasis on what the aid can bring to the child.

"Fitness of the parent" has centered in large part on the unmarried parent. Mothers' Aid laws in many states did not grant aid to unmarried parents. Because of this precedent and the prevailing hostility in many communities, unmarried parents did not at first benefit from Aid to Dependent Children. The ideal situation proposed by many is that aid should be given as a right on a casework basis and that, "in general, if it is considered to be for her (the mother's) welfare and that of the child together, assistance should be given."‡

Community pressure has often caused a mother to give up her child because of the refusal of assistance. When a mother determines to keep

*Federal Security Board. "Aid to Dependent Children, A Study in Six States." p. 39.

†State of Illinois. *Laws Relating to ADC and OAA*. Issued by the Division of Public Assistance under Department of Public Welfare, 1941. p. 2.

‡Labaree, Mary S. "Unmarried Parenthood under the Social Security Act." *National Conference of Social Work, the 66th Annual Conference*. New York, N. Y. Columbia University Press, 1939. p. 446.

her child regardless of censure, the economic problems which may ensue are often as detrimental as separating the child from its mother. Rulings on the use of Aid to Dependent Children funds for children born out of wedlock vary from state to state and even among the counties within a state. The Aid to Dependent Children program has had a pronounced effect toward the relaxing of formerly rigid rulings. In communities where general assistance would not be granted, Aid to Dependent Children is now the one means of assisting the parents, or general assistance is granted in supplementation of Aid to Dependent Children. As more and more communities are accepting the criterion of what is good for the children and where their needs will be best satisfied, denial of aid because of "fitness" of the parent is becoming infrequent.

The problem is complicated when the unmarried parents have more than one illegitimate child. Granting of aid in these cases brings up discussion of whether aid to such families only encourages their unapproved conduct. Here, again, the surest way of determining a course of action is that the child has rights and needs and the causal basis for deprivation of care and support is not the significant factor on an individual casework basis. In this way the worker may help in solving some of the problems within the family and can assure the community that funds are going where they are most needed.

Overlapping this problem are the difficulties that arise over racial barriers which some communities establish. It is unfortunate that the states where the Negro people, for example, are most in need of assistance are low per capita income states and have therefore, of necessity, set their maximums at or below that of maximum federal participation.

HOW STATES DETERMINE ELIGIBILITY

Various states make various definitions of what constitutes "incapacity" on the part of a parent under Aid to Dependent Children provisions. Some states—California, for instance—include tuberculosis as a measure of incapacity. In almost all cases incapacity must be certified by a medical report. This was perhaps inescapable since the states felt compelled to limit or define incapacity for reasons of fund limitations.* Some states require that Aid to Dependent Children cannot be granted

*The Social Security Administration reinterpreted the factor of physical and mental incapacity as of November 26, 1946, to broaden coverage by eliminating the necessity to establish in each case that the parent's illness, disability or defect resulted in his child's deprivation of support or care. (See *State Letter No. 70*, Nov. 26, 1946).

unless the parent's incapacity existed for a number of years. Others require proof that the father is totally incapacitated.

It is particularly necessary that children of incapacitated fathers be aided. In addition to the emotional struggle the father may be having, the children suffer because the mother must leave home to work. The attitudes which each member of the family brings to the situation are very important to the unity of that family. To withhold aid for a number of years in order to prove that the father is incapacitated is in complete antithesis to the ideals of Aid to Dependent Children. It is particularly essential that the disabled parent be allowed to maintain his position within the family and that the dignity and integrity of the family not be abused. Even if the parent should improve and once more support his family, the sums given as Aid to Dependent Children would have fulfilled their main function: preserving and strengthening the family ties.*

More than half of all cases accepted for Aid to Dependent Children are due to the continued absence of the parent from the home. Continued absence may be for a wide variety of reasons, among them divorce, desertion, or separation. Before any aid is granted, most agencies wish definitely to establish evidence of absence. California formerly required the mother to secure a warrant for non-support before assistance was granted. This was amended in 1945. Most agencies attempt to find the missing parent and enlist his assistance for the family.

Often in cases of separation, if the parent receiving the Aid to Dependent Children is willing, efforts are made to reconcile the family. The return of the missing parent does not always prove the end of trouble; a serious period of readjustment may follow which could, however, be eased by continuation of Aid to Dependent Children for some time. Many public agencies have yet to realize this fact.

The primary purpose of Aid to Dependent Children is to strengthen the normal family relationships and so preserve real assurance for the child. However, financial security alone does not offer a complete solution to many of the problems of these children. The problems of anxiety, experience of desertion, death, continued absence of the parent from home, parent's physical or mental incapacity or other conditions which make these children eligible for Aid to Dependent Children add to the usual anxieties of childhood and adolescence.

*"Laws Relating to the Department of Social Welfare—Aid to Needy Children," 1501 (d) (1), "A child who has been deprived of the father's support or care by reason of his continued absence for a period of at least three years." *Welfare and Institutions Code*.

A child living in a home in which there has occurred a shifting of normal family roles as a result of the father's desertion, imprisonment, or prolonged hospitalization is deprived of the opportunity for satisfying family relationships necessary to physical, mental and spiritual well-being. Furthermore, this child may have to face a community attitude of censure or pity due to his family situation.

A skilled family or children's worker sees Aid to Dependent Children as one of the most valuable resources extended to keep children in family homes. She also knows that the needs of children encompass many factors which cannot be defined under food and shelter. She realizes that such needs cannot be properly met without recognition of the needs of other members of the family. The placement of a child in the home of relatives for the purpose of giving Aid to Dependent Children should be dealt with primarily as a child-placing problem and therefore such placement should not be made without taking into account the factors that would enter into any placement of a child.

UNEMPLOYMENT INSURANCE

Unemployment insurance, otherwise known as unemployment compensation, is designed to provide an income for workers and their families when, through no fault of their own, they have lost their jobs or have been laid off. Unemployment insurance is meant to bridge the gap between jobs, thus protecting a family from want. Although unemployment insurance does not generally cover employees in small firms, more and more states have extended coverage to small firms having only one or more employees. It has excluded public employees, domestic service, agricultural labor, service for non-profit organizations and institutions and certain other employments.

Unemployment insurance is a state program, with the federal government paying the costs of administration, and setting up certain basic requirements to be incorporated in the state laws. Every state has its own law and benefits are paid out of a special fund set up under that law. To create this fund each state requires contributions from employers and employees who come under its law. The law of each state specifies who may receive benefits and how workers qualify. The amount of weekly benefit payments that a worker may receive also varies according to the state. In theory, it is approximately half the employee's full-time weekly pay, except that there is a top and a bottom limit. The maximum ranges from \$15.00 to \$28.00 and the minimum from \$3.00 to \$10.00, but in most states the lowest benefit is \$5.00.

The length of time a worker may receive benefits also is fixed by the different states. It ranges from twelve to twenty-six weeks.

An unemployed worker anywhere can learn at the nearest local state employment service office how to file his claim for benefits. Claims may be filed in any state, regardless of where the worker was previously employed. In June 1946 the national weekly average of beneficiaries receiving unemployment insurance was 1,406,757. The amount of payments was \$92,981,592.*

Unemployment insurance is a factor in any plan for safeguarding family life.

OLD AGE AND SURVIVORS' INSURANCE

Old Age and Survivors' Insurance is the only program of social benefits under the Social Security Act to be operated entirely by the federal government. Like unemployment insurance, it is a program for wage earners in private industry and business. It provides regular monthly benefits for insured workers and their families when the wage earner is at least sixty-five years of age and quits work, or when he dies at whatever age. Benefits are supplied to qualified workers from a trust fund which is acquired through special taxes on employers and employees. The trust fund is managed by a board of trustees composed of the Secretary of the Treasury, the Secretary of Labor and the Administrator of the Federal Security Agency.

The details of how the system works may be obtained from the Social Security Administration in Washington, D. C., or from any local office of the Social Security Administration.

Monthly retirement benefits are payable to the qualified wage earner when he is sixty-five or older and is not working; to the wife of such a man when she is sixty-five; and to his unmarried children under sixteen, or under eighteen if still in school.

Monthly survivors' benefits are payable to the following survivors of qualified workers, no matter at what age the worker dies: unmarried children under eighteen, his widow of any age while she has children in her care who are entitled to benefits, his widow when she reaches the age of sixty-five, his dependent parents if he leaves neither widow nor children.

A worker's *retirement* benefit and benefits of his wife and children are suspended for any month during which the worker earns more than

*Towne, C. L., Regional Representative, Informational Service, Region XII. Social Security Administration.

\$14.99 in employment covered by the Social Security Act. Survivors' benefits are suspended for any month in which the person receiving the benefit earns more than this sum on a covered job. A child's benefits continue, however, even though the mother earns more than \$14.99 a month in covered employment, and a widow's benefit continues even when her child earns more than this sum on a covered job. A child receiving benefits can no longer do so if he is adopted (except when adopted by certain specified relatives),* or if he gets married.

A child who is receiving monthly benefits under the Old Age and Survivors' Insurance plan could also get Aid to Dependent Children from the state if he is in need according to the state's standard and is otherwise eligible for aid under the state law.

These three programs under the Social Security Act tend to insure to children a period of childhood and an opportunity of growing up in their own homes.

GENERAL ASSISTANCE

General Assistance is the only form of public aid for needy unemployed persons, for persons whose earnings are too low for family or self-support, and for other needy persons and families not eligible for the special types of public assistance.

It is provided under state laws and is financed without federal participation. In about one fourth of the states, General Assistance is wholly financed and administered by the local communities without state supervision or other participation.

Because of local tradition, financing, and administration, the amounts of General Assistance vary far more widely among and within states than the other types of public assistance. General Assistance is the first to be restricted because the revenue available to small local units of government limits the resources they can obtain. In general, expenditures are greatest in high-income states and least in low-income states although the need here is presumably more extensive. Owing to insufficient relief funds, whole families may be excluded from eligibility—as, for instance, families with any employable member, even though not employed; or families receiving any other form of assistance, whether or not it is sufficient, et cetera. Also the length of required residence based upon local settlement laws may prevent a family from receiving General Assistance. As a result of settlement laws, families may be left without settlement in any state or locality because the length of settlement

*1946 Amendments Social Security Act, Title IV, Section 402, sub-section 202.

varies from place to place. Also settlement may depend upon status of the parent who is absent from the home; hence settlement of the family cannot be proved. Under these conditions children in a family dependent upon General Assistance have small chance to attain a feeling of economic security.

General Assistance should be available to any needy person on the basis of need alone. If the federal government at any time participates in General Assistance, as the Social Security Board has recommended, some satisfactory method must be worked out to apportion federal and state funds among counties or other subdivisions of the state on the basis of economic ability in order that needy people will receive equitable treatment.

GROUPS IN GREATER NEED

We cannot discuss the safeguards of family life without recognizing the difficulties experienced by children of minority groups. In the United States in 1930* approximately one third of the population group under eighteen were other than native born white of native parentage.

Deprivations in the field of education, recreation, housing, health care, income status, employment and the more subtle and devastating deprivation that comes from social rejection, all create a lack of family security that inevitably reacts unfavorably when we attempt to provide a happy and healthful environment for all children. Children of minority status are not the only ones affected. *All* children are jarred by the denial of opportunity to any on the grounds of race, citizenship, color, creed or financial status.

Children are born without prejudice and their reactions are influenced by the attitudes of their families and other adults with whom they associate. What they should receive in their early lives is an appreciation of the contributions minority groups have made to the material and cultural development of this country, and they should understand that social and economic status should not be fixed for any person because of race, color, creed, or nationality. Every child must eventually learn that he, and everyone else, has sprung from a minority group.

The Social Security Act contains certain important provisions affecting all children regardless of race, color, creed or nationality. No discrimination or mention of minority groups is made by the federal government in its grants to states. When standards of care or grants are

*U. S. Census, 1930. Census for 1940 did not give corresponding figure.

lowered for minority groups in any part of the country, this is done by the state or local community, not by the nation.

The child-welfare worker has a responsibility for two types of service in safeguarding family life: first, services which aim to better social and economic conditions for whole groups of people and, second, those services which help people with their individual needs.

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8

SAFEGUARDING THE HEALTH OF CHILDREN

In past centuries the children of the world were considered pawns of society. The weak or deformed were ignored or exposed to die. The strong were reared as fighting men or public servants. It was not until the time of the French Revolution that the child came into his own, was recognized as an individual with an inherent right to live. At present the pendulum is swinging still farther in this direction, giving the child a better chance of living to maturity than he has had ever before. Organizations of society are now functioning to set up standards of medical care and protection of children in the United States that will give to every child his fair opportunity for health.

MATERNAL, INFANT, AND CHILD MORTALITY

It is well recognized that health starts in prenatal life. Therefore, to give a child the best possible chance of starting with a well developed body, his mother's health, mental as well as physical, must be protected during pregnancy, and he must have the opportunity for safe delivery into the world.

When the United States Children's Bureau was established in 1912, one of the greatest public national health problems was the high mortality among women in childbirth and among their newborn babies. The actual death rate was unknown because births were not registered everywhere in the United States. The records that were available showed shockingly high loss of life. It was believed that at least one baby out of every ten born alive failed to survive his first year of life. Today carefully compiled records show that only four out of one hundred die and in some states only three out of one hundred.

In the early days of the Children's Bureau, for every 10,000 live births, some sixty-one mothers died of causes related to childbirth. Today the number has decreased to twenty-three of 10,000 live births, or about 7,000 women annually.

The seriousness of death of the mothers cannot be measured by their deaths alone. It must also be measured in the numbers of children who are left motherless.

Other mothers, because they lack proper care prior to or at childbirth,

may be left with damaged health which makes them unable to function as happy, wholesome individuals and parents.

MATERNAL AND CHILD HEALTH

To help mothers and children, the Children's Bureau had to have factual material on which to base its requests for better health services. Therefore, some thirty years ago its representatives went to carefully selected communities and called at each house, financially well-to-do and very poor alike, wherever a baby had been born within the year. They asked questions about care of the mothers and babies, and on the basis of material gathered in this way it was decided that, if the lives of mothers and babies were to be saved, help had to be given early in pregnancy. In communities where help was most needed, the local and state governments were least able to provide it; therefore help had to come through the federal government.

In 1921, the Sheppard-Towner bill was passed by Congress, over great objections, to get federally financed health services to mothers and children started throughout the states, particularly in rural communities. Public health nurses began to appear, calling at this house and that, teaching mothers how to take care of themselves and their babies. The idea of clinics, too, began to take hold—clinics where expectant mothers could go regularly for examination and instructions, and other clinics where babies could be checked in and examined regularly as a step toward keeping them up to par.

This help from the federal government—it amounted to only \$1,240,000 a year for all the states—was short lived. In 1929, it was cut off. The ground had been broken, though; it had been shown what could be done if more money were available, and at the same time more *facts* could be laid on the table as to why federal aid was needed. Those facts were obtained through a Children's Bureau study of maternal deaths that occurred in 1927-1928. This study was made in co-operation with physicians in fifteen states. The doctors helped to find out how many of the mothers died from causes directly related to childbirth. The simple word "childbirth" given on a death certificate was not enough; doctors determined the actual causes, and when they had their answers, it was shown that mortality among women during pregnancy, childbirth, and the postpartum period was unnecessarily high and could be reduced.

Then, in 1935, the Social Security Act was passed, and as the result of the groundwork that had gone before, it contained a provision—Title V, Part I—for maternal and child health services of the kind the Children's

Bureau had long sought. Funds were once more made available through the Bureau to help the states develop maternal and child-health programs. Moreover, for the very first time, federal help was to be given for the care and treatment of crippled children. Today, some 100,000 physically handicapped children are being reached each year through state crippled children's programs, and these programs are supported in large part through Social Security funds.

The program has since been expanded, although still only a small proportion of all those in need of these health services can be reached. The latest gain occurred in the spring of 1946 when Congress practically doubled the amount of federal money available for maternal and child-health programs. The federal appropriation for maternal and child-health services is now \$11,000,000.

In 1935, prior to the passage of the Social Security Act, thirty-one states had child-hygiene divisions or divisions of maternal and child health in their state health departments, but in only twenty-two states was the director a physician employed full time. Almost half the states had no special funds or less than \$10,000 a year for maternal and child-health services. Fourteen states spent less than \$3,000 a year or nothing at all for this work. In 1945, by contrast, the states used \$4,800,000 of state and local moneys in maternal and child-health programs, or almost as much as the federal fund then available. All of the states now have maternal and child-health divisions in the departments of health. All of the states, the District of Columbia, Alaska, Hawaii, Puerto Rico and the Virgin Islands are now participating in such programs.

PUBLIC-HEALTH EDUCATION

Many of the public-health nurses—they are now familiar figures even in rural areas—are paid in part from maternal and child-health funds made available under the Social Security Act. In this program the public-health nurses give health supervision and health-education service to mothers and children, and the local practicing physicians provide medical supervision to mothers in prenatal clinics and to children in child-health conferences. As part of her work, the public-health nurse conducts classes and makes home visits. In a limited number of areas, home-delivery nursing service is provided at the request of attending physicians. Nurses may give supervision to midwives, and in some states nurse-midwives are provided to train and supervise midwives and to a limited extent to give this kind of service. In a few places in the United States, midwifery functions independently of good medical supervision. This is

to be discouraged; but until adequate medical and hospital facilities are made available at a price all patients can afford to pay, the practice of midwifery will probably continue in certain areas, and the best that can be hoped for is to weed out the most incompetent practitioners and extend careful supervision over the remainder.

The prenatal clinics conducted by competent physicians, where each year some 160,000 women now come for advice and help during pregnancy, greatly increase the mother's chance of a safe and normal delivery.

Post-natal and well-baby clinics established in many localities, to which mothers take their babies and young children for regular health examinations, help to insure the babies' health.

Medical services vary greatly from one vicinity to another, but in general they are far superior in urban centers. Among small cities, twenty-five per cent lack child health conferences, many are without prenatal clinics, diagnostic and treatment clinics, and a great number have no kind of hospital. Provisions for children requiring prolonged institutional care or sanatorial or convalescent care are generally inadequate all over the country. The services that are available, in many instances, are not reaching the people with the greatest need. There is a great demand for more intensive case-finding projects and definitely more need for informing the public as to what facilities are available in certain areas. The facilities for the care of Negro children are far inferior in many states to those for white children.

It will take a very well conceived and organized plan, plus the construction of more hospitals, clinics, health centers and the training of more personnel during the next few years to meet the great and continuing needs of mothers and children in all cities and counties.

HOSPITAL SURVEY AND CONSTRUCTION ACT

Better facilities for care of expectant mothers, particularly those in rural areas, may be expected by reason of the Hospital Survey and Construction Act (S. 191) passed by Congress in August 1946. This act makes available to the states \$75,000,000 a year over a five-year period for the construction and replacement of hospital and health-center facilities. Federal administration of this Act is by the United States Public Health Service. States and localities are required to match federal grants on the basis of one-third federal and two-thirds local funds. Many of the hospitals and health centers will be built in places now lacking such facilities.

The amount of money appropriated for the functioning of nearly all types of medical programs in the United States is far less, in proportion to the need, than the amount appropriated for buildings and equipment.

Emergency Maternity and Infant Care: In March 1943, an emergency program was authorized by Congress to bear all or part of the cost of maternity and infant care in the case of families of lower-paid service men of World War II. The Children's Bureau was named the federal administrative agency.

EMIC, as it was called, was the largest public-health program for mothers and children undertaken in this country, up to that time.

CRIPPLED CHILDREN

In ancient times, cripples were left to the rigid forces of nature and the survival of the fittest. As short a time as one hundred years ago, there were no socially organized plans for the treatment of the crippled child. Public schools did not make provision for him and vocational rehabilitation was unknown.

The first attempts to provide medical care for cripples were sponsored by private organizations and funds. In 1897, the first state-supported hospital for the care of crippled children was established in Minnesota. From that time, progress in the care of this section of our dependent population has been rapid when viewed in the light of the void before; but viewed in terms of actual need, the current programs and facilities are pitifully inadequate.

One of the important milestones in the development of public responsibility was the passage of the Social Security Act, permitting allocation of federal funds to states wishing to organize programs for the diagnosis and treatment of crippled children. This was a permissive rather than a mandatory law and, as a result, even now the state plans are extremely unequal in their services, coverage and adequacy.

Until the state departments of public health, or whatever state agency may have been designated to handle the crippled children's services, began their case finding programs very little was known about the number of children needing care. The Children's Bureau had long been conducting surveys which gave estimates but, since most state departments of public health kept statistics only on deaths and communicable diseases, these surveys were limited in scope.

Survey of Physically Handicapped Children: As states began their crippled children's services they realized their available funds were a mere drop in the bucket compared to what was needed, so they dared not

publicize the program too highly for fear of arousing futile hope in parents whose children could not be helped. For this reason their registers of handicapped children do not include all of the children who really need care. Most of the figures quoted in a number of paragraphs that follow are not the totals of the state registers, but are approximations compiled from intensive surveys carried on in varied selected areas, made more accurate by medical knowledge of the ratio of the incidence of the disease or condition to geographical areas and age groups.

In 1936,* the ratio of cripples was six to each 1,000 of the population under twenty-one years of age. However, at that time, only the obviously disabling conditions were figured in that calculation, so it does not contradict later figures to be quoted from the same source. Of each one hundred crippled children, twenty-four had been that way from birth, eleven had been the victims of accidents, ten were suffering as a result of nutritional deficiencies, and fifty-five as a result of disease. Poliomyelitis was responsible for three out of ten crippling conditions.

During the past ten years we have come to consider that conditions less obvious than paralysis, deafness, blindness, amputation, and malformation can disable and can result in adults who are physically and emotionally unable to be independent. Hence, the next set of figures, published in 1944,† presents a more alarming picture. According to these figures it is estimated that there are in the United States:

- one half million children who have or have had rheumatic fever, and in consequence may have damaged hearts;

- seventy thousand educable children suffering from cerebral palsy. This would indicate between twenty and twenty-five thousand uneducable children with cerebral palsy who would be possible candidates for custodial or institutional care, since approximately one out of four children suffering from cerebral palsy is mentally incapable of profiting from education;

- thirty-five thousand children with diabetes;

- one hundred fifty thousand with epilepsy;

- one half million with varying forms of tuberculosis;

- one million with congenital syphilis. The longer these go untreated the sooner the inevitable tolls of tertiary involvement are exacted;

- one million with asthma;

- two or three million with other forms of allergic response.

*"If Old Scrooge Came Back Today." Children's Bureau. *The Crippled Child*. U. S. Government Printing Office, Washington, D. C. 1936.

†Huse, Betty, M. D. *Care and Treatment of Crippled Children*. 22nd Annual Meeting National Society of Crippled Children, Chicago, Ill. Oct. 29-31, 1944, Mimeo.

These particular data included no figures for the accidental and usual orthopedic involvements, probably because these are the only conditions receiving anything approaching adequate attention under current programs. Of the disabilities listed above, tuberculosis has long been fought by a nation-wide organization and even though millions of dollars are donated to the fight, each year hospital and sanatorium facilities remain inadequate. There are several additional national organizations in the health field such as the National League for the Prevention of Epilepsy; The National Society for Crippled Children and Adults, including its many state chapters; National Foundation for the Prevention of Infantile Paralysis; The American Heart Association, The American Cancer Society, and others.

Even now, with millions being spent to cure and relieve crippling conditions, an amazingly small amount is provided for research to control and prevent such conditions.

The Seventy-Ninth Congress, which adjourned August 2, 1946, increased from \$3,870,000 to \$7,500,000 the amount authorized under the Social Security Act for annual appropriations to the states for services for crippled children. Federal funds are allocated to states on a matching basis. The Children's Bureau continues to be the federal administrative agency.

Now that almost twice as much federal money is obtainable, children with rheumatic fever, children with cerebral palsy—"the spastics"—and children with epilepsy are some of the large groups who can be helped under state crippled-children's programs. If the states will provide additional funds and expand their programs, not only children now handicapped will be reached, but also those children who are suffering from a condition that may lead to crippling.

Approximately 20,000 known to agencies as being in need of care will be the first to receive help. For the most part, they are the obviously crippled; the child born with a harelip, a cleft palate, a club-foot or some other malformation; children with bent backs and twisted bodies; children with tuberculosis of the bone, diseases of the joints, bone infections or infantile paralysis; children with eyes that are crossed, or other eye conditions that require surgery.

One of the greatest needs is to extend services for children with rheumatic fever and heart disease. It is estimated that rheumatic fever kills more school-age children than any other disease, but as yet little concentrated effort has been made to eliminate it.

Only twenty states, and fewer than two hundred fifty counties in those

states, have services for children suffering from rheumatic fever and rheumatic heart disease.

The children with cerebral palsy are another group for whom services should be developed. Unable to co-ordinate their movements or speech, these children are often thought to be mentally defective, when in fact the majority of them are of average or above-average intelligence. It is now known that much can be done for this group, but the treatment is too expensive for most families to afford even if it could be obtained near their homes. Additional funds should broaden the facilities for care and treatment.

Medical science has also found a way of dealing with epilepsy that opens up a prospect of a normal life for many children now suffering from this disease.

More can be done than in the past for those children suffering from infantile paralysis and left crippled by it, and children who have diabetes or asthma may also be helped.

Procedure Followed in Treatment of Crippled Children: It will take time to locate the children who need help, to train personnel and to develop programs for care. In some states, a court order is still required before the child can be accepted for treatment under these programs. Court action should not be necessary when the agency and the parents are eager to work out a treatment plan.

Under a state crippled-children's program, diagnosis is arranged for at a crippled-children's clinic—it may be a permanent clinic in a hospital or health center or an itinerant clinic in a smaller more remote area—or, if a child is acutely ill, the physician will go to the home. For any crippled child, examination and diagnosis are absolutely free, regardless of family ability to pay. Care and treatment are usually expensive. If the family cannot pay for the needed services, they are furnished through state and federal funds. Sometimes, if a family is able to do so, it pays a part of the cost of care. Eligibility for medical care is based upon the child's need, not upon the parents' ability to pay.

An important feature of a crippled-children's program is the effort to keep children from causes that cripple. Individual and community effort is important in this respect. Parents must guard children against accidents and disease. Children must be taught how to avoid accidents. Better obstetric care for mothers will reduce birth injuries and crippling due to syphilis. Periodic medical examination of children, especially in the pre-school period, will reveal injuries and disease in the stage when treatment can be most effective.

CHILD-HEALTH SERVICES

School-Age Child: Despite much work done by national organizations, private persons and the medical profession, there is still great evidence of need all over the country for improved medical care for children of school age. The most striking factor brought to public attention was the figure from the United States Army Selective Service System showing that two out of every five men called for service in World War II were rejected on physical or mental grounds. Of these, thousands were rejected for causes that could have been remedied in childhood.

Too often in the public health programs, more emphasis has been placed on medical examinations and the diagnosis of diseases than on follow-up care. There is evidence throughout school records of the same diagnostic finding year after year. Many times parents have been told of their children's troubles without any advice or help on how they can procure help to treat the problem. Such procedure overlooks the educational aspects of the health examination.

Programs of health education, guidance and services for school children are being increasingly developed—in some cities, under the education department; in other cities and in rural areas, under the health department. These programs include careful physical examinations (except when evidence of examination by family physician is submitted by the parents); thorough tests of eye-sight and hearing, with recommendations for remedial measures if necessary; immunization and vaccination when not taken care of by the parents. For children participating in athletics there are special medical examinations.

Health examinations in schools should be given by competent physicians and dentists assisted by well-trained school nurses. When parents are unable to be present during the physical examination of their child, the school nurse reports and interprets to the parents the result of the examination and any indicated need for correction. The nurse should also be responsible for suitable follow-up in cases where defects are remediable. In small communities and rural areas, school nursing service may be given by nurses from the health department.

Prevention Against Childhood Diseases: It is hoped that, as a part of the school health program, more adequate provision will be made for immunization against those communicable diseases of childhood which can be prevented by this treatment. Diphtheria, scarlet fever and typhoid fever are almost under complete control now in some communities; but measles, whooping cough, poliomyelitis and others of the communicable diseases cause about 3,000 deaths each year among children from one to

five years of age. Rheumatic fever, influenza, pneumonia, tuberculosis and appendicitis take approximately 5,000 lives annually among children five to fifteen years of age. (Rheumatic fever is the highest single cause of death in school-age children.) All of these prevalent diseases could be curtailed immeasurably with the proper medical help. In the decade from 1930 to 1940 alone, according to the Bureau of Census figures, the death rate from contagious diseases for the five to fourteen year old group was cut to one third of that of the preceding decade.

Part of every child's care should be a complete periodic health examination by a physician trained in the care of children. The frequency should depend on the child's age, his growth, and evidence of deviation from satisfactory physical and mental condition.

Dental Hygiene: Periodic dental examination, dental education and service should be a part of the health services for all children. Dental education and services should be provided throughout their school years. Parents should begin the program of care in the pre-school years.

Mental Health of Children: A program of mental health for all children actually begins with the formation of wholesome attitudes and the acquisition of suitable knowledge by the parents before the child's birth. There should be courses for all expectant parents in which the physical and emotional needs of the child should be made clear.

Many mothers and fathers do not actually know or understand that from the time a little human being comes into the world his mental health depends upon his physical comfort, his happiness, and a chance to express himself without too much unnecessary frustration. Birth itself is a traumatic experience for the baby. It brings a sharp and severe change to him.

If he comes into a home where he is wanted, if he is made comfortable through the feeding process, if he is given reassurance by affectionate care and cuddling, he has the kind of start necessary for becoming an optimistic, hopeful, secure person. If, however, he comes into the world unwanted, neglected either physically or by a cold, indifferent parental attitude, it is very difficult for him to function as a happy, wholesome little person.

As a child grows, he is constantly faced with the continuous necessity of adjusting himself to living and so he is bound to have problems. And at some time in his development he is bound to show evidences of some disturbance in greater or lesser degree. He may be rebellious and unreasonable; he may quarrel with other children; he may refuse to eat; or he may develop fears or become preoccupied with sex practices to the

exclusion of other interests; or he may show other behavior symptoms that are disturbing while they last. But, if the parents' attitude is understanding and helpful, the child usually emerges with success.

Many parents content themselves with hoping that their children will work out such difficulties in their own individual ways and that time will cure all—that the child will grow up and the problem disappear. By taking this attitude, parents sometimes seek to avoid the responsibility of fully facing the fact that there are basic underlying causes that must be eliminated. Unless help is obtained for the child, he may grow out of one particular problem. This may merely be, however, the exchange of one symptom for another, which parents may fail to realize. A child may become docile and well behaved and yet develop night terrors; he may stop sucking his thumb and take to nail biting; he may suppress his jealousy of the new baby and start to wet his bed; he may quit being overaggressive but lose interest in the outside world by becoming absorbed in daydreams. Thus, the basic underlying cause still remains.

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DISTRESS SIGNALS

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Parents, often unconsciously, regard disturbances in their children as a reflection on themselves; hence they become panicky at the mere notion that their children might have problems and will go to any lengths to blind themselves to what is often a genuine "distress signal." But when a maladjustment is already so deep-seated as to crowd nearly everything else out of the picture and severely cripple the personality, the individual problem is one for the psychiatrist or the child-guidance clinic and the parents must be able to turn to professional counsel. For not all behavior difficulties can be successfully treated just by a combination of sympathy and common sense; these things are of fundamental importance to the sound growth of the child, but they are not a guarantee against emotional disturbances any more than against physical illness. Such disturbances may be deeply rooted in parent-child relationships and may require treatment of one or both of the parents as well as of the child; this could be learned only through study.

Parents must have some place to turn for expert guidance when signs first indicate that the child is emotionally upset. Symptoms, a few of which have been mentioned, show that these children need help quite as much as the child whom we ordinarily think of as being ill. Yet outside of large urban areas, few communities are equipped to give the necessary assistance.

The schools are in a strategic position to conserve the mental health

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of children and to recognize the child in need of help. However, parents cannot leave the solution of mental-health problems to the teachers, even if they were trained for this, because by the time the teacher comes upon the scene, some of the most important things that fix a child's behavior have already happened to him.

The child is never an isolated person. He is not born with mental health. Whether he attains and maintains it depends upon his immediate family, his home, his school, his recreational activities, his companions, and his own attitudes towards all these.

Parents living in both urban and rural areas need to have available to them the services of good child psychiatrists and children's workers with sound psychiatric training. The development of mental-hygiene programs in the states should serve to point out the existing needs and the available facilities and trained personnel, and to co-ordinate and integrate all work for the mental health care of the child.

NATIONAL MENTAL HEALTH ACT

The operation of the National Mental Health Act, approved July 3, 1946, includes children in its scope. Its stated purpose is to improve the mental health of the people through (1) conducting, assisting and fostering and promoting the co-ordination of research relating to the cause, diagnosis, and treatment of psychiatric disorders; (2) training of personnel in matters relating to mental health; and (3) developing and assisting states in the use of the most effective methods of prevention of psychiatric disorders, and for diagnosis and treatment of persons with such illness. The United States Public Health Service is to administer the Act, which includes provisions for grants to the states on the basis of plans submitted by the state mental-health authorities. On July 8, 1947, Congress appropriated \$7,500,000 to implement the measure.

At the present time, one person out of twenty can expect to spend some part of his life in a mental institution. This figure can be greatly decreased if we can get skilled care to the "behavior problem" child in time.

HEALTH WORK WITH THE CHILD

The child-welfare worker can and should play an important role in all phases of any handicapped child's existence from the time the handicap is recognized until the maximum benefits of treatment have been realized and rehabilitation has been completed.

In case finding, all the professions play a part. The family, clinic, or public health doctor probably makes the original diagnosis. The teacher

in the public school may be the first to notice the symptom and to suggest to the family that something be done. The public health nurse, either as a visiting nurse or as school nurse, may first spot the difficulty. Even so, the child-welfare worker is not without her responsibility in this phase of the work. As a member of the staff of a public or private agency she may be the first outsider to learn that something is wrong. This is especially true of the pre-school child. The worker should know of the facilities available for competent medical or psychiatric care and be able to refer the family properly.

Her responsibilities do not end with the referral. She now has an entree to learn the parental reactions to obtaining care, the family financial status, and at least an inkling of the parents' attitudes toward the child. It may be that much work with the parents will be necessary before they are willing to co-operate in a plan for the child's care, and the child-welfare worker, already known to the family, can probably do this more effectively than a worker unknown to them. It is also her place to present a summary of her knowledge of the total family situation to the medical agency so that it may have the most complete possible picture of the problem ahead.

In the actual treatment of handicapped children, parental attitudes can play either a constructive or destructive role. Some parents can accept the problem and the child, secure treatment, recognize the child's need for compensations, and let this make little difference in family relationships. Others react by rejecting the child because of what they regard as his imperfections, and by developing various forms of guilt mechanisms to cover the rejection. Some manifestations of the guilt mechanisms are overanxiety, overprotectiveness, and overstimulation of the child to achieve things beyond his ability.

Most of the destructive attitudes arise in parents who are immature or inadequate emotionally and unable to rise above an additional strain. Occasionally a person who has seemingly adjusted well to all other phases of living will show an unexpected weakness when confronted with a deformed or otherwise handicapped child. True parental attitudes are often uncovered during or after a disabling illness. One parent may have a destructive attitude and so negate some of the emotional gain made by a child during treatment.

In very young children, especially, the parental attitudes must be of a constructive nature if anything is to be accomplished, since the emotional development and maturation of the child depend so completely on the atmosphere in which he lives. With the many strains of physical

illness and handicaps pulling him this way and that, we could not expect him to make a satisfactory adjustment without the security of parental affection and approval.

CHILD-WELFARE WORK WITH THE HANDICAPPED

Knowledge of parental attitudes and evaluation of them may determine how long a child should be kept in hospital and whether he is to return to his own home or go to a convalescent or foster home for further treatment.

The child-welfare worker helps the physically handicapped patient in any age group to reach a nice balance between being aware of, and reconciled to, the handicap, and striving for as much independent living as can be achieved. Occasional patients do themselves physical damage by refusing to admit their need for help, but more resign themselves to self-pity and helpless invalidism which make needless misery for themselves and those on whom they depend.

It is a duty of the worker to be watchful of the health of children in foster homes and in institutions for which she is working. Foster parents and others who are caring for children are required to have physical examinations; often it is left to the worker to evaluate the resulting medical information.

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CHILD-WELFARE WORK AND THE SCHOOL

The whole child, not just his mind, comes to school. Therefore the school cannot say "We have responsibility only for teaching him subject-matter; his emotional and social development is no concern of ours." The school must, in addition to imparting information, help the child to use his mind and body and to develop social relations satisfying to himself and others. There must also be integration of his school experience with social environment.

INTEGRATION OF EDUCATION AND CHILD-WELFARE WORK

The social environment of the child has a determining influence on his ability to gain the most from school. Hence the need is becoming increasingly felt for the child-welfare worker or the school social worker who can assist the child in terms of that environment.

Progressive education's basic tenet, of respect for the personality of the child, is aided by the work of the child-welfare worker in making such changes in the child's environment and therefore in him, as will enable him to participate more effectively in his social and school life. These factors bear out the assertion, often heard nowadays, that a close relationship between child-welfare services and the school will contribute toward progress in both fields.

The school is the strategic center of child-welfare work. Not only does the child spend many of his waking hours in the atmosphere of the school, but many of his friendships are formed there and his success or failure, according to the school's standards, is likely to be the basis upon which he is judged in the community and even at home. The interests of the teacher and the child-welfare worker should meet in their concern for the child.

A child's life is a continuous thing, as a whole, of which home, school, and other activities are component parts, not shut off in separate compartments but interrelated and interacting upon each other. The adequately trained teacher is aware of the fact that deficiencies in health or food may prevent the child from benefiting fully from school. She also knows that his emotional adjustment affects the way in which he reacts to other children, to his teacher, and to his school work. She recognizes that the withdrawn child or the excessive daydreamer may be in need of

help more than the overaggressive child. She is aware that the so-called "smart aleck," the boastful, the bullying, the hostile child is insecure and needs acceptance and attention. She does not overlook the problems of the child new to the community and the particular school. She understands why the child from an institution or foster-home or an economically deprived home may need to tell "tall tales" of his accomplishments and his rich relatives or to experiment with obscene language or drawings. She realizes that truancy is an expression of an individual need, perhaps for something the school has failed to provide. All of these problems she sees. The extent to which she is able to do anything about them depends upon her training, experience and personality, and the limitations of time.

Large size of classes, lack of teachers, and paucity of school equipment tend to restrict all flexibility of school programs and prevent the teacher from helping the individual child in spite of her interest in doing so. She realizes that her major responsibility is to the group and her work will not permit her to devote time to unravelling the behavior tangles of one child while forty others wait for her attention. Few lay citizens realize that large classes for children in schools are an extravagance, not an economy.

PARENT EDUCATION

Some recognition of individual differences and behavior problems of the school-age child, and the fact that teachers could not be expected to solve all these problems, must have been present when in the middle of the nineteenth century there occurred a spontaneous growth of mothers' groups throughout the country for the purpose of discussing current literature on child behavior. Their interests were largely confined to problems of obedience, punishment, reward, curiosity and imagination, with emphasis on getting the child to conform to certain well-established behavior standards.

Child training was considered the sole function of women, and the few advanced men who dared brave the Mothers' Congress that met in 1897 were considered a humorous touch. Something of the democratic approach to the problems seeped through in the welcome accorded the one Negro delegate.

The folk movement that had its humble beginning in the limited interests of these groups grew until it reached the structure of the Child Study Association of America, a major force today in promoting a program of continuous parental education.

At about the same time that national recognition of need for parental education was demonstrated by the meeting of the Mothers' Congress, the American Association of Collegiate Alumnae, now the American Association of University Women, began a systematic study of its members' children. Today, it continues to expand its activities to include local study groups, research in the field of child development and education for family life, and the provision of research fellowships for women.

The federal government entered the scene at the beginning of the twentieth century, through the home economics departments in the land-grant colleges, by instituting training for family life for farm youth. At about the same time, actual data about human behavior became available and replaced the morally charged content of earlier years. Shortly afterward, the professional social worker became an important factor, made available by the establishment of research and training centers through both private grants and government funds. In addition, many local agencies were participating in parent education.

NATIONAL COUNCIL FOR PARENT EDUCATION— OTHER GROUPS

An attempt was made to co-ordinate all of these activities by the organization in 1928 of the National Council for Parent Education. This organization served to relate the various parent education activities; state and local participation, however, still varies with each individual community. The White House Conference in 1930 aided in the recognition of the need for parent education and included as a part of the Children's Charter the objective, ". . . and, for the parent, supplementary training to fit them to deal wisely with the problems of parenthood."

Among government departments today that deal in some measure with parent education are the Office of Education and the Children's Bureau, in the Federal Security Agency; and the Extension Service and Bureau of Home Economics, in the United States Public Health Service. These agencies, usually concerned with a specific aspect of parent education, co-operate with state and local departments of education in their programs, provide pertinent material, and serve as clearing-houses for studies of nation-wide interest.

To this list must be added the National Congress of Parents and Teachers, an organization that since 1897 has held a strategic position and given valuable service, not alone in educating parents, but also in assisting parents and teachers to work together with greater mutual respect and understanding.

A conservative survey of nation-wide groups engaged in parent education lists seventy-three agencies and admits it may have omitted some that are doing excellent work. In 1936, every city and town in the United States and sixty per cent of the rural communities were estimated to have programs of parent education. An analysis of the programs would doubtless show much duplication of activities, for the parent educators are represented in various government levels, in voluntary organizations formed for the specific purpose, and in a large group of others that participate as a by-product of their major activities and functions.

Despite the apparently extensive scope, the range of effectiveness is limited. This is due partly to the voluntary nature of many activities and partly to the plethora of organizations with little centralized planning. Parents in the lower economic brackets are not touched to any significant degree despite the encouraging work of the emergency education program set up during World War II. The available supply of parent educators is limited and classes are generally constituted from those most desirous of learning and, mainly, best informed. The goals of the educators vary with the agency involved, and the parent confronted by a multitude of theories and practices may be a little lost in the wilderness of the program. There is obvious need for co-ordinating the work without losing the experimental quality.

Adequate and widespread pre-parental education would obviate the need for much of the work now being done; however, there will always be need for the discussion of parents' problems under the guidance of skilled consultants, and in order to serve the child effectively the parent must continue his own education.

CHILD-WELFARE WORKER AND PARENT-CHILD RELATIONSHIPS

Many social agencies carry on classes for parent education, employing in their work both individual and group methods. Child-welfare workers serve as counselors and guides on matters concerning parent-child relationships, behavior crises, and the influence of social conditions on the welfare of all children.

Parents and educators, in their search for cures of a child's behavior problems, began to realize in the late 1920's that they could not deal directly with overt symptoms of behavior difficulties without giving consideration to their underlying causes. Why was it that all children did not fit equally well into an accepted pattern of conduct? Children, it was found, were frequently unable to gain the maximum value from

their school experience because of unfavorable conditions affecting other areas of their lives. Furthermore, changes within the school itself were taking place. The development of compulsory education and child labor legislation meant enlarged school enrollments, expansion of school plants and courses of study. The classroom teacher could not maintain the close personal contacts she formerly had with her students.

Because of all these things, it was felt that a closer relationship among home, school and other groups who knew the child would be necessary. One means for this would be employment of a person whose duties would include those of a liaison nature among home, school and social agency. So began the visiting teacher movement, now known as the American Association of School Social Workers.

The movement began in the school year of 1906-1907 in New York City, Boston, and Hartford, Connecticut. These initial efforts were entirely independent of one another and developed with slightly different emphasis.

Co-operation Movement Between Home and School: In New York, Miss Mary Marot, a teacher who had for many years been interested in the social aspects of education, became a resident of Hartley House, a neighborhood settlement. She and representatives of three other social settlements in the city formed a Visiting Teacher Committee and assigned two visitors to three school districts. The purpose was to bring about closer co-operation between the home and the school for the benefit of the settlement children. The committee became a part of the Public Education Association and by the end of two years the staff had been increased to seven. By 1913, the work had demonstrated its worth and was taken over by the Board of Education and established as a part of the work of the New York public schools.

In Boston, the Woman's Education Association made the beginning by establishing a home and school visitor in the Winthrop School. The reason given was that lack of understanding between the home and school often resulted in injustice to the child. The mothers found it difficult to visit the school, and the large size of classes made it impossible for the teacher to know the homes. Neighborhood associations took up the idea. By 1923, seven elementary schools and two high schools of Boston were provided with school visitors. The work was carried on in an informal manner and there was no centralized organization.

At Hartford, the work began in 1907 under Dr. William S. Dawson, Director of the Psychological Clinic. The visiting teacher was called a "special" teacher. She assisted the psychologist by obtaining histories

of the children and by co-operating with the school in carrying out the recommendations of the clinic.

Other cities followed these three. Organizations in Worcester, Massachusetts, began in 1909 and 1910. The worker there was entitled "supervisor of attendance" and co-operated with the nursing staff and psychological clinic.

Between 1913 and 1921, boards of education in several parts of the United States adopted visiting-teacher work in grade and high schools. The White-Williams Foundation, which provided counselors for the schools of Philadelphia, added the function of vocational counseling and junior employment service. The Chicago Women's Club influenced the establishment of visiting-teaching work in Chicago in 1916. Here it was placed under the Employment Certificate Bureau. The Club was also interested in the establishment of the Vocational Guidance Bureau and the School Children's Aid Society; the visiting teachers co-operated with both of these.

The greatest impetus was given in 1921 when the Commonwealth Fund adopted its Program for the Prevention of Delinquency. The National Committee on Visiting Teachers, Affiliated with the Public Education Society of New York, was organized and its work was incorporated into this program.

One part of the program was committed to this National Committee on Visiting Teachers, which consisted of leaders in the fields of education and social work. Visiting-teacher demonstrations were to be established in approved communities throughout the United States. Thirty such communities, with a wide range of geographical, social, and educational situations, were chosen from among two hundred seventy applications. The Committee appointed the teachers, paid part of their salaries and other expenses and provided supervision. There was local sharing of salary which was usually one third. The demonstration period lasted for three years, and there was an understanding that if the projects demonstrated their worth they would be taken over by the local communities.

As the purpose of the program was not only to extend the work of the communities included in the program, but also to furnish a wide variety of illustrations for other committees which might wish to introduce it, significant data and reports interpreting the results of the demonstrations were published. Those of most general interest to both teacher and social worker are "The Problem Child in the School" by Mary B. Sayles and "Children at the Crossroads" by Agnes E. Benedict. The first is a group of twenty-six stories of visiting-teacher cases in

urban communities. The second is similar, except that its stories are of work done in rural communities.

The National Conference of Visiting Teachers and Home and School Visitors was organized in 1916 and its first conference was held in conjunction with the National Education Association meeting that year in New York City. In 1919, at Atlantic City, a second national conference was held in conjunction with the National Conference of Social Work. At that time, the relation to community welfare was emphasized. The group was reorganized as the American Association of Visiting Teachers.

In 1942, this name was changed to the American Association of School Social Workers. This is in keeping with the greater emphasis upon the social-work aspects of both work and training.

THE WORK OF THE SCHOOL SOCIAL WORKER

The work of the school social worker has varied from city to city as well as through the years. Essentially she has tried to help the child attain a full life by supplementing the work of the teacher when the child failed to respond in the accepted manner or in some other way appeared to have individual problems. She is definitely not an attendance officer, although unquestionably she is at times expected to function as one.

It is unnecessary to review in detail the changes in the work of the school social worker throughout the years. Generally it seems to have followed the development of education and of social casework.

The school social worker is a part of the school administration. She is appointed because the teachers and administrators realize that the teachers cannot handle all problems of maladjustment which may arise. Even when a teacher has understanding of motivations for behavior, she does not have the time and usually does not have the necessary training to deal with special problems. It has been pointed out that the very emphasis in mental hygiene upon seeing children as individuals has caused some confusion for the teacher. She has a responsibility for the whole group and also another responsibility for those children who do not conform. She can be freed from this conflict of duties if the school social worker is available to work with her and to assume some responsibility for the child who needs individual attention.

The school social worker works with the child and the teacher, She is concerned also with parents and others, including social workers, who have a relationship to the child. She is expected to talk with and counsel the child, his parents, and teacher. She also is expected to give the school

a picture of the child's out-of-school life and convey an understanding of the school life of the child to the home and community.

Her work develops and changes to meet different conditions and changing concepts. She may also find it necessary to adapt her program to the wishes and needs of a particular school, remembering always that she is a part of the school even though she does not work in exactly the same manner as the teachers. She cannot be rigid in establishing the limits of her duties. This is particularly true if the service is not well accepted by others in the school and she must gain acceptance before she can establish an effective program.

The amount of casework done by the school social worker varies, and there is some feeling that she should refer cases to other agencies if they need continued intensive casework. She can do much to relate educational and social goals.

The school social worker is employed primarily in urban areas. Her services are little used in rural communities, although measures passed by the legislatures of two states, Michigan and Louisiana, to employ visiting teachers in state-wide programs seem to show their intention to carry the work into rural areas.

Some of the schools of social work are setting up courses for training of school social workers. The training needed would seem to be fundamentally in the field of social work, especially in child welfare. However, it is an asset to the person to have experience or training in the field of education.

VOCATIONAL GUIDANCE AND COUNSELING

According to several writers, the term "vocational guidance" first appeared in print in a brief report to the Board of the Vocational Bureaus in Boston dated May 1, 1908. This report was made by Frank Parsons, the founder of the vocational guidance movement in this country. The definition of the term has gone through several changes, and these have been similar to the change in the concept of social work—that of helping a person in trouble to help himself. As first practiced by Frank Parsons, vocational guidance meant counseling with a young person to see whether a job could be found to suit him. This was usually done just before he entered upon his first job, and he had had very little, if any, training for a specific type of work.

In 1925, vocational guidance was defined as the "giving of information experience, and advice. . . ." After numerous revisions as a result of study and discussion by the national organization, the 1937 definition

states that vocational guidance is "the process of assisting the individual to choose an occupation."

It is the general consensus that the major responsibility for providing youth with needed vocational guidance rests upon the school system. It has charge of the majority of young people at the time when they are most in need of guidance. It is also in a position to assemble material concerning the qualities and characteristics of youth, both individually and in groups. It can bring together the needed occupational information and can use it to the best advantage. Some of the measures which were developed during the 1930's to meet the needs of youth did not concentrate wholly on the provision of work, but also attempted, in part, to fill the gap left by the incomplete functioning of other programs dealing with the education and guidance of youth. The National Youth Administration, the Civilian Conservation Corps and the United States Employment Service, all had programs of guidance. Although the main objective of the National Youth Administration and The Civilian Conservation Corps was for relief purposes, the stimulation of educational interests and the social and economic rehabilitation of youth were also regarded as of major importance. It was expected that, if young people were given work to do, not only would they be spared the demoralizing effects of idleness and be kept off the streets, but they would also become more employable by obtaining work experience and work habits.

Vocational preparation is part of the school's educational job. To perform this part well, the school must keep in touch with both employers and organized workers—with the former in order to know which types of employment are likely to be available in the community, and with the latter in order to avoid placing youths in competition with already trained workers.

Counseling service should be at the student's call. In many cases, however, the counselor will have to instigate the interviews and make the student aware of the service available to him. The successful counseling interview is so conducted that the student leaves it feeling that choosing a vocation is a serious undertaking for which he himself is responsible and that the counselor is ready and able to give him further help in the matter.

The complexity of the social and economic scene and the changing technological requirements of production have for many years made it increasingly difficult for parents and others interested in the future welfare of young people to provide appropriate guidance and counsel in regard to occupational adjustments. To some extent the schools have

supplemented the counsel given by the family. Young people who have left school are not in the habit of turning to the schools for guidance and so are not apt to keep in touch with the schools. The United States Office of Education, realizing the need of occupational information being presented to the public regularly and efficiently, in 1939 set up the Occupational Information and Guidance Service which is meant to keep the country supplied with information on changes in the field.

There are many misconceptions about counseling and vocational guidance. One is that advice and assistance in this field are simple procedures calling, perhaps, for experience but little or no special skill or knowledge. Another is that it is an interesting form of easily learned psychotherapy. Both of these attitudes are dangerous in that they invite dilettantism.

The untrained worker may handle interviewing skillfully enough to obtain a vast amount of information and yet not know how to use this information effectively. To recognize that the individual functions as a total organism and that the work or school adjustment may involve a life adjustment makes it essential to look beyond the routine, the procedure, the immediate dislocation. Counseling involves a basic casework process and there is no substitute for knowledge of personality and behavior, for mastery of the basic disciplines. Only professional knowledge can give real skill in helping people or in recognizing that there are situations that must be left alone.

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10

THE CHILD AND RELIGION

It has been estimated that approximately three out of every five children in the United States between the ages of five and seventeen are not receiving any form of religious instruction as such. Religion is an integral part of man's cultural heritage, and regardless of whether we believe in it or not, we cannot disregard the fact that it has played an important part in the development of knowledge, moral standards, ideals and purposes.

History gives factual evidence that education, law, medicine and care of the destitute were developed by religious institutions and continued to be administered by them for a long period until part or all of the functions were taken over by secular institutions or agencies. In studying how great music, art, literature and architecture came into being, we find it possible to trace the influence of religion upon creative lives. Through such study and the works themselves, we become conscious of a kinship running through humanity, past, present and future.

Religious beliefs are interpretations of meaning and as such are always dynamic. Insight into reality involves action toward reality. Religious needs are not separate from the rest of life, but are an integral interwoven part.

The practical philosophy of life that every child needs for his satisfactory adjustment must have its religious side. Such a philosophy rests upon a perspective that extends beyond his immediate experiences and is based on ultimate reality. Without this, the present techniques of living may seem to him to be an end in themselves and so they may obscure from him the more permanent values of scientific attitudes and objective methods of thought. A code of secular ethics is needed, but it may not cause him to develop personal and social integrity nor satisfactorily aid him in forming a consistent plan of life unless it is based on his insight into life's nature and meaning.

A child's every act and dream is motivated by some kind of an ideal; his emotions are intimately related to moral values. He needs to be strengthened by a conviction of his own personal dignity and worth; he needs to be furnished with comforting and elevating ideals; he needs to

believe in the worth and wholesomeness of human personality; he needs to feel that he has a secure and significant part in a sane world. In all this he can be helped by religion.

The chief, but not the only, responsibility for giving the child an appreciation of spiritual values rests upon the family and the church. The primary responsibility is within the family, for it is here that the attitudes of the child are first formed. Families that are practicing adherents of churches give religious training as a matter of course, but many families neglect or evade giving such instruction because they are confused, indifferent, or desirous of keeping their children free from indoctrination. It is within families like the former that the child is first introduced to the religious concepts of the group into which he was born. And the introduction is the more effective precisely because it occurs in the family. Here attitudes are developed, mother tongue is learned, culture is instilled. Here the child shares experiences that are traditional with the group.

No other social agency can be substituted for the family in the nurture of the child's personality. First lessons about many aspects of living are taught the child by each member of the family. Here, through family experience, the child learns to be tolerant, sympathetic, flexible. Here he learns to live in such a way that he can be tolerated by groups and individuals outside the family. Consequently it is in the home, through behavior of every member of the family, that the child develops a code of mores. Regardless of the neighborhood in which a child may live, certain attitudes developed within the family may assist or hamper him in his adjustment.

Children begin early to ask questions about the world's creation and about death. The task of the parent, whatever his own religious adherence, is to answer these questions in a way that will help the child develop a coherent and sustaining philosophy. Religion, like culture, is not communicated by the formal process of teaching alone, but more exactly as a result of participating in family life where foundations are laid for moral standards that are a guide to his conduct through life.

Even in families where early instruction is given, however, the religious needs of the growing child outrun the facilities of the home, and it is to the resources of the church, the synagogue and the chapel that the child most often turns to find an adequate program of religious experience.

THE CHURCH AND THE ADOLESCENT

The problem of the meaning and significance of life is keenly felt in adolescence. The adolescent, in trying to establish independence from his parents, often feels it is necessary to reject their religion also, yet he is fearful and unsure. Equal uncertainty and lack of confidence assail him in those other dilemmas of adolescence—how to bring about satisfactory relations with the opposite sex, and how to decide upon a vocation. The child's comfortable adjustment in all these situations might be greatly aided by group experience in the church.

This is readily explainable. In the church, youths acquire a therapeutic benefit through the feeling of belonging, of being needed and liked, of working with a group for common goals. Here, also, they may extend their concept of the community to include national and world neighbors, to consider the welfare of others equally with their own, to work for the eradication of social injustice and racial intolerance, with the moral support of friendly people who have the same objective.

The school and the social service agency, as well as the parents and the church, have a responsibility to furnish the child with opportunities for the development of religious attitudes and participation. The child-welfare worker quite frequently must help the child with emotional conflicts in which religion is a vital concern. To be of real help, the worker must have achieved a practical philosophy of life and a scale of values consistent with this philosophy. She must be able to recognize and appreciate the differences and many-sidedness of religious beliefs and to help the child in an effective orientation of his moral values to the standards set up by a complex modern social organization.

The task of all concerned is lightened in the United States by the existence of freedom to worship according to one's own conscience. In the average community in America, children are thrown into contact with the religious beliefs and usages of other children whose families have given to them something of their cherished traditions and religious heritage, and have answered questions in the light of their own religious faith. Children may learn that religious differences are largely the result of man-made quarrels over human interpretations of truth. They learn, too, that the major requirement of all major religions is an attitude of good-will and a constant effort to foster right human relations.

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11

THE CHILD AND RECREATION

Values: Leisure time is one of the dividends of a mature civilization. The way it is spent determines to a large extent the culture of an individual and, collectively, of a nation.

Recreation, thought of as a leisure-time activity, receives widespread recognition as an essential factor in the physical, mental and spiritual growth of an individual or a group. Webster, the cornerstone of definition, defines recreation as a synonym for play. George D. Butler,* believes it is an attitude or spirit which finds expression in various ways and which brings a measure of rich and joyful living to those engaging in it.

The word "recreation" implies a re-creation of the individual through constructive use of an area of leisure time for activities affording relaxation, release from tensions, freedom to be one's self.

Therefore, by means of recreation, the individual may find constructive expression for those instinctive urges toward competition, comradeship and co-operation; a chance to sublimate in a wholesome way the need for adventure, for change, excitement and for the expression of the gang spirit. Among other specific values which recreation may give are: respect for rules, fair play and courage; an ability to subordinate the selfish interests of the individual to the welfare of the group; a capacity for team play, and experience in leadership. The social contacts and co-operation fostered by recreation help to free personality from fears, shyness and dislikes and minimize all those mannerisms, edgy differences, overindulged peculiarities, which set one person off from another.

Play forms a large part of the young child's life. It is usually the center of all his interests and activities. The child, through his play, is preparing for adult life, regardless of how little visible similarity there may seem to be between the spontaneous activities in the play pen and the way he, as an adult, will meet some of the adventures and frustrations of later life.

As the child grows older, "play" is distinguished from other types of

**Social Work Year Book*, Russell Sage Foundation. New York, N. Y. 1945.

activity and becomes "recreation." It supplies an opportunity for developing motor, manual and artistic skills and some of the socializing experiences of group life.

Children of all ages need time for play or recreation. The family group may furnish valuable situations for recreation both within and without the home; in addition, the child needs recreational opportunities outside the family circle.

History: Until comparatively recently, few cities seemed to care where children played. Playing in the streets was indirectly encouraged, for schoolgrounds were closed except during school hours and signs at public parks warned children against playing on the grass. Attempts to organize play for children went unrecognized.

The movement for providing children with play space had its real beginning in 1885, when a religious society in Boston placed a heap of sand in its chapel yard for little children to play in. Other private agencies, especially social settlements, became aware of the need for playgrounds.

This activity awakened the interest of cities and gradually public playgrounds were established throughout the United States. By 1900, the play movement was well under way. In 1905, Chicago established ten recreation centers which included enclosed grounds for children of all ages, as well as field houses consisting of assembly halls, indoor gymnasiums, swimming pools, club rooms, and even branches of the public library.

The Playground Association of America, now the National Recreation Association, held its first convention in 1907. Since then the play movement has steadily expanded. It has broadened to include leisure-time activities for groups of various ages. It is now commonplace to say that play space and an opportunity to spend playtime with other children are essential to the all-around development of every child.

From the very start of the playground or recreational movement, the community aspect was recognized. Leaders realized the need of developing public opinion behind the idea that provisions for recreation were a proper municipal function. Public co-operation was sought in whatever way possible. Public school authorities were urged to make schoolyards available for play purposes outside of school hours. Pressure was brought to bear upon city park commissioners to turn their ornamental parks into well-equipped playgrounds. Progress was slow, but remarkable.

FEDERAL PARTICIPATION

From using schoolyards only, cities began to establish children's playgrounds on a wider scale, and to open recreation parks and school buildings for community use. Plans were shaped for year-round community recreation programs for persons of all ages. City recreation departments were established to provide a variety of local facilities and services; areas of various sizes were acquired and developed; funds were allowed for recreational leadership and extended leisure-time opportunities through public libraries, museums, and other educational and cultural centers. During the 1930's, the recreation budget of cities was decreased, but *federal* funds came into widespread use for leadership and facilities, enabling recreational services to continue in many communities. The federal departments which promote the programs affecting the use of leisure are as follows:

National Park Service, United States Department of the Interior;
Forest Service, United States Department of Agriculture;
Federal Public Housing Authority;
Recreation and Office of Community War Services in the Federal Security Agency. (The last-named was responsible for initiating and developing adequate recreation programs in war communities and in March 1944, established and counseled twenty-four state recreation committees so as to strengthen community efforts.)

STATE PARTICIPATION

Many state governments, through their park and forestry departments, have acquired and developed large areas for recreational use. Early state laws relating to local recreational services limited them to particular types of areas, facilities, activities, and organizations. Later, home-rule legislation of twenty-seven states empowered municipalities to conduct broad recreational programs and appropriate funds, to acquire and equip land for recreational purposes, to conduct programs, to employ personnel and to designate or appoint recreational authorities. Thirteen states levy a special tax for the support of such provisions.

Recreational programs must be suited to the needs and cultures of the communities involved. In general, however, municipal planners consider these factors essential to successful services:

- a full-time, trained recreation executive;
- a year-round program serving all recreational interests of the people without restriction as to race, religion, age or sex;
- availability for recreation of all suitable city-owned property;
- a segregated recreational budget;
- a governing board or committee of responsible citizens.

OTHER AGENCIES PROMOTING RECREATIONAL PROGRAMS

Among those aiding in the development of programs for the community have been voluntary groups such as settlements, youth-serving associations, boys' and girls' work organizations. These have constructed buildings containing gymnasiums, swimming pools, auditoriums, craft and club rooms and other recreational facilities and have developed property for camping.

There has been participation also by industrial plants, churches, service clubs and service organizations, and by private groups formed, under national auspices and otherwise, to foster participation of members in sports, hobbies, music, et cetera.

Along with all this there has been a tremendous growth of commercialized recreation enterprises. Commercialized recreation may be beneficial if wholesome and low in cost, and if it supplements services rendered by community agencies. Generally, its great expansion has served to point up the inadequacy of community facilities.

In community plans for recreation the greatest asset is a high degree of co-operation between the city departments and voluntary agencies. This co-operation can be achieved through recreation councils, committees of councils of social agencies, and other groups formed to further mutual understanding on this subject.

CHILDREN'S CAMPS

Each summer finds thousands of youngsters in America packing their bags to go to camp; and this is well. The joys of the camping experience are available to all too few.

The idea of summer camps got its start in 1885 when, under the auspices of the Y.M.C.A., Mr. Sumner Francis Dudley conducted a camp on Orange Lake, near Newburgh, New York, for seven boys. Since then the movement has grown until today more than 5,000 camps, serving annually about 1,000,000 boys and girls, are maintained by welfare, social and religious organizations and private interests.

A few decades ago, state and federal park and forest authorities further developed the camping practice, and in some cases changed it from a summer to a year-round activity.

During World War II, day camps received impetus. Maintained by a variety of groups and agencies, they made it possible for a child to be brought to camp in the morning and taken away in the early evening.

The adequacy and effectiveness of all camping programs, no matter how extensive, are determined by the number and quality of the persons

employed as leaders. Because parents have very definite reasons for sending their children to camp and children have very definite objectives in mind when going there, trained leaders are necessary. They must have a sound philosophy of life and a good knowledge of the basic concepts of child welfare.

Fundamental to any program which seeks to guide the development of boys and girls intelligently must be an awareness of the chief characteristics of the group. However, one should never lose sight of the fact that each child is an individual and that there is never an inflexible universal pattern of behavior.

SOCIAL GROUP WORK

The leisure-time group is one of the most important groups to which the child belongs. Although he first learns to relate himself to others in the family group and later in the school, it is in the dynamic group-work setting under the guidance of a skilled leader that he will learn to relate himself more positively to a group and to other individuals. The child will gain satisfaction from having his accomplishments recognized by the other members of the group and at the same time learn to recognize the accomplishments of other members. Identity with the group, "in-group" feeling, should develop, followed by the ability to identify with outside groups and interests, so that there may be a resulting growth in personality and social adjustment.

The group may be a natural one brought together, say, by common interests, age, proximity or cultural background, or it may be a selected group of individuals chosen by a group work agency. Group work may take place in any of the community's group-work agencies, such as the Y.M.C.A., Y.W.C.A., Girl Scouts, Boy Scouts, Boys' Club or settlement house.

Many special groups have been set up on the group-work principle, such as groups for children especially handicapped physically or socially. A special club was developed for a group of diabetic boys and girls. Here they were able to overcome insecurity, develop responsibility for their own diets and injections, and have fun by planning social events in which they could all participate. As a result of their ability to relate themselves more easily to one another, they were able to become members of outside groups of "normal" individuals.

"Gangs" into Groups: Community agencies have tried to attack the problem of juvenile gangs through a group-work approach. Early attempts were made to break up gangs and persuade the children to join

some "nice character-building club." This method was not successful; the boys and girls found their gang life much more exciting than a "character-building" club. As a result of this failure, a new approach has been tried—that of working with the gang. With the gang as the starting place, the interests of the children were followed and directed into more positive channels in terms they could understand. Later the group could affiliate with one of the community agencies if it so desired.

It was only recently that group workers came to recognize their relationship with casework and that the group-work agency began working on the principle of development of the individual, using the concept of "self-help" and the program as a tool to accomplish this end.

The term "social group work" first appeared in the 1920's, but it was not until 1935 that group work became a major division in the National Conference of Social Work. Soon after this, the National Association for the Study of Group Work was formed.

Everett DuVall has commented, "Figuratively speaking, we may now say that group work still has its roots in the field of recreation, is a branch of social work, and is bearing fruit in a manner not unlike that of the field of progressive education.*"

The modern objectives of social group work are personality growth and social adjustment. If these goals are kept constantly in view, we have a program of mental hygiene in practice. Workers in every type of agency are using more or less informal educational procedures to help develop desirable personal qualities and improve conditions under which children live. This necessitates the application of principles of psychology and social sciences and also use of the democratic principle of "self-help."

Group workers are apt to develop their statement of purpose in three divisions. Objectives are related to: a. personality growth and social adjustment of the members of the group through voluntary association and group activity; b. group development and achievement, including group integration and socialization, and c. the development of a widened social consciousness.

ADJUSTMENT OF CHILD TO SOCIAL CHANGE

The ultimate objective of all group work is to help the individual become a social being. In this process, he learns to adjust himself to a constantly changing society. He will learn to use some of the changes to

*DuVall, Everett, *Personality and Social Group Work*, New York, N. Y. Association Press. 1943. p. 3.

meet his own needs and the needs of the community. The development of skill in a certain craft or art is an objective in itself because it brings satisfaction to the individual and an increase in ego. It also becomes the means of broader association with fellow-members who have the same interests.

Natural groups are formed in interesting ways. DuVall says, "Various research studies have shown that boys tend to associate with and form attachments to other boys of similar age, size, maturity, and levels of intelligence, and that girls choose friends of similar scholarship ability." Many other factors bring together groups of considerable heterogeneity: proximity of homes; common experiences; similarity in economic level or cultural background; religion, race, nationality; athletic interest. As a result, a natural group may be formed with a similarity of one or two interests but a great dissimilarity of other factors.

Groups directed by trained leaders may vary in size, but should be small enough so the leaders will be able to have considerable knowledge of the individuals and the members will have the opportunity to know one another. These groups, whether discovered or created by group-work agencies, should meet with some degree of regularity. The program of activities should be developed on a democratic basis by the group.

Except in unusual cases like those mentioned earlier, social group work concerns itself with the more or less "normal" boys and girls. It does not invade the field of group therapy, although in less serious cases of maladjustment, the agency may provide individual counsel and guidance.

To distinguish social group work from group therapy, we may say that group therapy uses the group for the treatment of "maladjusted" children.

GROUP THERAPY

Group therapy is the newest method in the young group-work profession, which has had many changes and has drawn from many sources in its short life.

The field of group work was just beginning to get itself organized into a profession, when some members of the group who were psychiatrically oriented saw in groups certain possibilities for treatment. Since this method involved treatment in groups, rather than individually, they called it group therapy to distinguish it from the individual interview situation.

Therapy is the current concept adapted to the needs of the patient and popularized by the new, scientifically introduced treatment for war

casualties. Just as group workers have used the terms vocational therapy and occupational therapy to describe some of their duties, they now will undoubtedly use the phrase group therapy. In J. W. Klapman's most inclusive text published in 1936* the term *group therapy* was used interchangeably with *group psychotherapy*.

At the heart of the technique of group therapy there is complete disagreement among authorities.† Therefore, material presented here must be general, the desire being only to clarify and differentiate the terms—group work and group therapy.

According to Webster's Dictionary, *group* means: two or more figures forming a design or unit in a design, an assemblage of persons or things forming a separate unit; and *therapy* means: medical science which treats of the application of remedies for diseases, curative, pertaining to the healing art.

The external tools of group therapy for children are:

- children in the presence of other children;
- tools and work materials;
- adults.

It is unique in its purpose, relationships and atmosphere. The techniques of applied psychotherapy define the kind of adult, the permissive atmosphere and the preoccupation with the aims of psychiatry so that the child is exposed to a therapeutic or healing process. It is implicit that the child is emotionally sick and needs help. The means by which the extent of maladjustment or need for therapy is measured depends on many factors, which must be defined in each case by the agency and the therapist.

The purpose of the permissive atmosphere is to provide a situation where the patient is freed to act out hostilities in the presence of an adult and other children without fear of discipline, censure or restraint, though at the same time he is restrained from physical violence or dangerous destructiveness. With the sick child, the adult must accept behavior which would ordinarily bring punishment, in order to break the vicious circle of destructiveness—followed by rejection—followed by destructiveness. The tension of the sick child is released and his conviction that the world is hostile and persecuting is exposed to doubt; assurance of acceptance can counterbalance inner indictments that he is worthless, "BAD," unwanted and alone.

**Group Psychotherapy; Theory and Practice*. Greene and Stratton, New York, N. Y. 1936.

†For further information read: Redl, Fritz, *Problems of Clinical Group Work with Children* and Slavson, Samuel R., *Introduction to Group Therapy*.

The illness in the patient is created and enforced by outer pressures which may become so unbearable that the child is unable to react in a healthy, acceptable manner and is no longer amenable to the usual educative processes, counseling or discipline. To the intensely deprived child, the slightest denial is a major rejection so that an essential is an atmosphere which can relieve anxiety.

When intrapsychic tensions are broken down, the patient becomes accessible to emotional reconstruction and the extreme behavior is no longer utilized as self-defense. The patient is enabled to establish a positive relationship, first with the therapist, then with members of the group, his family and the world. The successful treatment will bring the child to the point where he can withstand more of the controls and denials imposed by the world.

The function of the psychotherapist is to make the patient more accessible to an educative process and thereby recondition the personality structure whereby the child can participate in the regular influences of the home, school, club, church, and general recreation. Therapy is indicated where the child blocks his own emotional development.

The play interview, used by psychoanalysts, psychiatrists and psychiatric caseworkers, is seldom applicable for older children who are unable to obtain pleasure from symbolic play which would lead to interpretation. The child who avoids any form of fantasy expression and play is also inaccessible as well as the child who finds a play situation between child and adult unnatural.

Children who undergo vehement developmental changes view adults as representatives of societal and all other pressures and they resist "advice-seeking" or "problem-awareness." Often the parents, teachers and other educative influences are hostile to a casework or psychiatric approach, and this hostility is reflected in the child's attitudes during interviews. In certain types of cases and under certain circumstances, the effect desired cannot be achieved through interviews so well as through group pressures exerted by contemporaries, but under controlled conditions.

Selection of the group for therapy is not at random. It is carefully done on the basis of the individual problems and the anticipated interaction among personalities of the individuals, and also according to the theory of the leader regarding the kind of group experience that can be therapeutic.

Where a therapy group is developed through close analysis and discussion of the total personality of the patients, the records of interviews

and case history of the patients and the nature and source of the difficulty are used intensively. Since the purposes and techniques of the psychiatrist, psychologist, and caseworker differ radically from those of the teacher and group worker, a great deal of mutual interpretation must be made to clarify the uses and value of group treatment.

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EMPLOYMENT PROTECTION FOR THE YOUNG WORKER

The Need for Protection: Unregulated child labor has been recognized as a social evil in the American economic order for years, but progress in control has been laborious and slow. All of the states and territories have regulatory laws of a sort, but efforts for a uniform national law have been fought tooth and nail.

Few persons, if any, would take the position that a child should not be permitted to do any work; it is recognized on all sides that the welfare of the child may be served by some types of work, well within his capabilities, the doing of which will give him purpose, plan and freedom and an opportunity for self-development. However, there is very general agreement that a child should be protected against overwork and types of work that crush or stultify him.

Under our capitalistic system of private profit, children have been unmercifully exploited and abused at the hands of ruthless and inconsiderate employers whose sole concern has been mercenary gain. At law a minor is considered too immature to bind himself in the responsibilities of a contract, but the law permits him, if he has the consent of a parent, to assume responsibility for his own safety, health, and future in undertaking to labor for another. Hence many children have thwarted and stunted their physical and mental growth, exposed themselves to serious physical and moral hazards, sacrificed their opportunities for education, and even lost their lives by working in unfit places under improper conditions at too young an age.

Child labor laws are society's protection of children from these adverse conditions, against which children alone are neither sufficiently mature nor responsible to protect themselves.

Tom Ireland, Judge, Municipal Court, Cleveland, Ohio, in naming his book *Child Labor as a Relic of the Dark Ages*,* stated the situation clearly. In early American colonial days, most of the work performed by children was about the house or for neighbors or relatives and could hardly be considered child exploitation in the present sense of the term. It was with the advent of factories in the United States that great changes

**Child Labor as a Relic of the Dark Ages*, G. P. Putnam's Sons, New York, N. Y. 1937.

came in the economic status of children. The early manufacturing establishments used such relatively simple mechanical operations that children could do the work of adults and at the same time could be paid lower wages.

Several factors supported the generally accepted idea that children should work. It was thought morally desirable and economically necessary. First, the Puritan tradition against idleness was so powerful that little time was set aside for play and leisure. Children were supposed to learn discipline and responsibility at an early age; life was a very serious matter. Secondly, the labor of children and women was considered to be a valuable asset to the Colonies.

The Colonies wished to become independent (especially economically) from the Old World and every pair of hands was needed. As early as 1790, Samuel Slater, founder of the cotton industry in the United States, hired nine children between the ages of seven and twelve in his first experimental cotton mill at Pawtucket, Rhode Island.

The first spinning machines were so simple to operate that a small handful of adult supervisors could oversee several hundred children as they tended the spindles. Then, as the industry expanded, the local supply of children proved to be insufficient, and the mills advertised in papers, by letter, and leaflet for families with five or six children to settle near the mills, guaranteeing "constant employment and encouraging wages." The employers preferred boys and girls between the ages of eight and twelve. And citizens considered it an act of public service to direct such children to the mills!

An advertisement appearing in *The Federal Gazette* of Baltimore for January 4, 1808, is an example of the enticing methods used to lure families and little children to the mills:

BALTIMORE COTTON MANUFACTORY

This Manufactory will go into operation in all of this month where a number of boys and girls from eight to twelve years of age are wanted, to whom constant employment and encouraging wages will be given: also, work will be given out to women at their homes, and WIDOWS, will have preference in all cases, where work is given out, and satisfactory recommendations will be expected.

This being the first essay of the kind, in this city, it is hoped that those citizens having a knowledge of families who have CHILDREN destitute of employ, will do an act of Public benefit, by directing them to this institution.

Applications will be received by Thomas White, at the Manufactory

near the Friend's Meetinghouse, Old Town, or by the subscribed. (Jan. 4, Isaac Burneston No. 196 Market Street.)

The figures of the *Digest of Manufacturers* in 1820 showed the high percentage of youthful workers in the textile mills, the majority under the age of twelve. In Rhode Island, children under twelve made up fifty-five per cent of the labor force of the mills; forty-seven per cent in Connecticut; and forty-three per cent in Massachusetts. Even the youngest children were not barred from industrial employment.

EARLY LEGISLATIVE EFFORTS

Public attention was first focused on child labor when the long hours of toil interfered with education. A legislative remedy, sought in Connecticut in 1813, attempted to revive for that state the remarkable Massachusetts universal compulsory education law of 1647 by requiring from three to six months' schooling per year for all youth. Even before 1813, many of the mill owners felt impelled, because of public opinion and their own moral convictions, to provide religious instruction and elementary libraries for their young employees. Strange to say, few people seemed to question a child's ability to learn after toiling for twelve hours a day!

In 1836, Massachusetts provided that children under fifteen could not be employed in manufacturing concerns unless they had been to school for three months of the year preceding. The workingmen's associations, or labor unions, exerted considerable pressure against the working of young children, and were to a very large degree responsible for this law of 1836.

The regulation of hours of work was the next step in child labor legislation. Massachusetts set the pace in 1842 by prescribing a maximum ten-hour day for those under the age of twelve; Connecticut followed suit the same year for children under fourteen. Several other states copied this pattern in quick succession. In 1853, a legislative committee in Rhode Island found by investigation that many youngsters were working twelve hours for eleven or twelve months of the year. Immediately, an act was passed restricting child labor to eleven hours per day and setting a fairly strong educational requirement for working children.

It was about the middle of the nineteenth century that legislation began to be enacted to prohibit the employment of children, under certain ages, in manufacturing industries. Pennsylvania led by barring twelve-year-olds from working in factories. That was in 1848. One year later the age was advanced to thirteen.

Other states followed. Rhode Island fixed the minimum age for factory work at twelve years in 1853; Connecticut at nine in 1855; Massachusetts at ten in 1866. By and large, however, these child-labor prohibitions were ineffective because of the poor drafting of the laws, the inefficiency of enforcement, and also the lack of co-operation from either the employers or the parents. Evidently the parents did not understand that the presence of children in the labor market, at low wages, acted to lower the rates of pay of the adult workers. Because their own wages were low, they felt that the wages of all members of the family were needed.

INCREASE IN CHILD LABOR DUE TO INDUSTRIAL EXPANSION

In the period following the War between the States (1861-65), tremendous advances were made in transportation and communication, in the expansion of factories, and the growth of cities. Many new opportunities for the employment of children arose because of the great and rapid industrial progress, particularly in the East. Children began to infiltrate the cigar-making and wood-working trades to such a degree that the skilled craftsmen in said trades became very fearful of the competition of cheap child labor. As labor-saving devices became more numerous and efficient, young, untrained workers entered other than the textile industries. Child labor was not confined to manufacture; there were openings, for instance, in messenger work, clerking, and the street trades (errand and delivery boys, news venders, etc.).

Little, if any, attention was given to the educational and physical well-being of the young workers. Illiteracy increased alarmingly because the youngsters started working at such tender ages as seven or eight years.

Home work in tenements and other undesirable places, by people of all ages down to the very young, began to flourish from 1885 on. Some of the home work conditions, hours, and wages of that era seem fantastic to the citizen of today.

NEED OF FEDERAL INTERCESSION

Indications appeared in the last third of the nineteenth century that the federal government had begun at last to take cognizance of the child-labor problem. In 1870, the Census Bureau of the United States began to gather information regarding employment of persons over ten years of age, instead of fifteen years and over, as before. The first convention of the American Federation of Labor, in 1881, adopted as one of its goals the complete abolition of labor by youngsters under fourteen. In Senate hearings of 1883, union spokesmen strongly pointed out that child

labor was an injustice to a growing person, that it was inefficient, that the ultimate social costs were much too high, and that child employment was harmful competition to adult breadwinners.

Some years later, the various states began to realize that better child-labor legislation was needed. The laws already passed lacked uniformity and seemed to attack the problem without any plan. When a state adopted a strict child-labor law, it placed itself at an economic disadvantage because some of its industries were bound to move elsewhere. The wonder was that a few states had courage to make some attempt at regulating child labor. However, the laws usually lacked adequate coverage and their enforcement was lax.

For these reasons sincere advocates of child-labor laws in the United States favored a unification of laws through national legislation. As early as 1888, the American Federation of Labor urged Congressional action in the control of child labor.

Still, because of arguments in behalf of states' rights under the Constitution, the power of Congress to pass laws for the direct and exclusive control of child labor was seriously questioned.

In 1899, the National Consumers' League was formed. One of its main purposes was the elimination of child labor and industrial home work.

Then, in 1904, came the National Child Labor Committee, through whose efforts, to a great degree, the United States Children's Bureau was to be born in 1912.

FIRST EFFORTS IN CONGRESS

The first actual proposals for national regulation of child labor in the United States were made in Congress only forty years ago in an effort to provide uniform and effective control in the various states. Since that time this goal has been only partly attained. For the main part, two channels toward national child-labor laws have been explored: one, directly by Constitutional amendment, and the other through liberal interpretation of existing congressional powers under the interstate commerce clause of the Constitution. To date, the former approach has been blocked and the latter has afforded only limited results.

The initial federal proposals were made in December 1906 when Theodore Roosevelt was President. Nothing materialized immediately.

In 1907, the Bureau of Labor of the United States Department of Commerce and Labor conducted a far-reaching investigation of workers under the age of sixteen. Children of this age group composed twenty per cent of the operatives in the textile industries in the South, twenty-

three per cent of those in the silk industries in Pennsylvania, and ten per cent of those engaged in the glass enterprises of the United States. Amazingly enough, it was found that eighty-four to ninety-six per cent of the children of fourteen and fifteen years of age in families connected with the glass, textile, and silk industries were at work.

During the years following, child-labor bills of one kind and another were proposed in each successive Congress but none of them became law. At first they were killed in committee; later, when a few were reported out of committee, they were never brought to a vote, or they were passed in one house and sidetracked or defeated in the other.

When national legislation finally became a fact, it was at first directed at the oppressive industrial labor of children in regimented industries such as mines, factories, and mills. Other child-labor occupations, such as the street trades, appeared more difficult to regulate and therefore remained uncontrolled. Because of the many legal, economic and social issues involved, the achievement of uniform federal child-labor legislation was slow indeed.

The Owen-Keating Bill: In September 1916, national legislation became a fact when the Owen-Keating Bill regulating and restricting child labor was passed by Congress. This law did not become effective until September 1, 1917; employers had a full year in which to make necessary changes in their labor force.

This first law invoked the powers of Congress over interstate commerce to regulate the industrial labor of children. It prohibited the shipment in interstate and foreign commerce of goods produced in mines or quarries in which children under sixteen were employed; or in mills, canneries, workshops, factories or other manufacturing establishments in which children under fourteen were employed; or in which children fourteen to sixteen years of age worked more than eight hours a day or six days a week, or between the hours of 7 p.m. and 6 a.m.

Although this law was an attempt in the right direction for the protection of young laborers, it had no provision covering the young agricultural worker. It made no mention of the many who labored on farms to the detriment of education, health and welfare—those who would be just as much a part of future society as the young workers needing protection from the hazards of mechanical and industrial labor.

This act met with opposition organized and led by representatives of southern textile industries. In the summer of 1917, opponents urged that since the United States had entered World War I, the military conscription and the demand for ships, munitions, and war supplies were creating

a serious labor shortage; therefore, the enforcement of the act should be postponed until after the war. However, Congress felt that curtailment of non-essential industries would provide a sufficient labor force for war industries. This position on the part of the federal government did much to prevent ill-considered acts on the part of state legislatures by giving state officials moral backing to oppose any demands for relaxation in state laws. Indications were that in the winter of 1917-1918 there was less rather than more employment of children in violation of state laws than in previous years.

The Owen-Keating Act provided that the power to make rules and regulations for carrying out its provisions be given to a board composed of the Attorney General, the Secretary of Commerce, and the Secretary of Labor. It provided that this board should decide the conditions under which and the persons by whom federal work permits or employment certificates for minors should be issued. An examination of the child labor laws in each state was made to determine whether or not they met minimum standards of the federal law. If so, the state was permitted to serve as an agent of the federal government in the issuance of work permits for minors and the making of enforcement inspections.

This law went into effect September 1917 and was administered by the U. S. Children's Bureau which had been created by Congress in 1912. On June 3, 1918, however, it was declared unconstitutional by a five-to-four decision of the U. S. Supreme Court in the *Hammer vs. Dagenhart* case. The decision stated that the attempt of Congress to bar the products of child labor from interstate commerce was an unconstitutional attempt to control the processes of production and manufacture, which were supposed to be a subject of state or local concern.

The Revenue Act of 1919: A second attempt at federal regulation of child labor was made in 1919 through a ten per cent tax imposed on the profits of mines or manufacturing establishments employing children in violation of the standards originally set forth under the Owen-Keating measure. This law, imposing a tax on the products of child labor, was included in the Revenue Act of February 1919 and remained in operation until May 1922. On the latter date, by an eight-to-one decision in *Bailey vs. Drexel Furniture Company*, the United States Supreme Court held the tax to be unconstitutional because it was not a valid exercise of the taxing power of Congress.

The Child Labor Amendment: The supporters of child labor reform then sought an amendment to the Constitution of the United States in order to achieve federal control and afford protection to the hundreds of

thousands of child laborers who had not been reached by the sporadic and ineffective legislation of the states.

Accordingly, President Warren G. Harding recommended an amendment to the Constitution that would directly give Congress unquestionable power to enact legislation for the regulation of child labor. However, the amendment was not presented to Congress until 1924, when Calvin Coolidge was president. The proposed amendment was introduced in the Senate by Samuel M. Shortridge from California and in the House of Representatives by Israel M. Foster from Ohio. The House passed the amendment on April 26, 1924, by a vote of two hundred ninety-seven to sixty-nine, and the Senate on June 2, 1924, by sixty-one to twenty-three.

The proposed Child Labor Amendment declares:

Section 1. The Congress shall have power to limit, regulate and prohibit the labor of persons under eighteen years of age.

Section 2. The power of the several States is unimpaired by this article except that the operation of State laws shall be suspended to the extent necessary to give effect to legislation enacted by the Congress.

Despite the large vote in its favor—more than four-to-one in the House and nearly three-to-one in the Senate—the proposed amendment is not yet a part of the Constitution. The necessary ratification by three-quarters of the states has not been accomplished although more than two decades have passed. When the amendment came up for ratification, it met with tremendous campaigns of opposition. Because of this opposition, only four states ratified in 1924 and 1925. And the adversaries so well propagandized the nation that until 1933 interest waned, with only two more states acting favorably.

At that time, during the depression, children were working at deadening and hazardous occupations for extremely low wages while adult men were unemployed and standing in bread lines. In 1933, President Franklin D. Roosevelt wrote to the governors of many states prevailing upon them to encourage their states to ratify the Child Labor Amendment, and in that year fourteen more states ratified.

This outstanding success brought on retaliation by the opposition to the extent of organizing a well-planned campaign which concerned itself primarily with resisting ratification of the Amendment. Opponents have even said the proposed Amendment would make it illegal for a mother to ask her daughter to wash the lunch dishes or her son to bring in an armload of kindling.

Because of this counterthrust, only eight additional states ratified between 1934 and 1938, bringing the total to twenty-eight. The refusal of

certain state legislatures to ratify is directly opposed to public opinion as was seen in a nation-wide pool conducted by the American Institute of Public Opinion in the early part of 1937. This poll showed that a majority of the citizens of each of the forty-eight states favored the Amendment; and that for the country as a whole seventy-six per cent favored ratification. This indicates the effectiveness of the opposition. Following is a list of the states that have ratified the Amendment and the year of the action:

Arizona	1925	Kentucky	1937	Ohio	1933
Arkansas	1924	Maine	1933	Oklahoma	1933
California	1925	Michigan	1933	Oregon	1933
Colorado	1931	Minnesota	1933	Pennsylvania	1933
Idaho	1935	Montana	1927	Utah	1935
Illinois	1933	Nevada	1937	Washington	1933
Indiana	1935	New Hampshire	1933	West Virginia	1933
Iowa	1933	New Jersey	1933	Wisconsin	1925
Kansas	1937	New Mexico	1937	Wyoming	1935
		North Dakota	1933		

THE NATIONAL INDUSTRIAL RECOVERY ACT

During the depression years of the 1930's. when cheap child labor was given preference by employers over more expensive adult labor, the public demanded regulation, not so much as a protection to health and welfare of children as for the economic purpose of decreasing adult unemployment.

The National Industrial Recovery Act was passed by Congress on June 13, 1933, for the stated purposes of meeting the emergency of national unemployment. eliminating unfair competitive practices, improving standards of labor. and increasing purchasing power. The Act provided for the national organization of industry into a kind of cartel plan. Each industry was asked to submit a detailed plan of its organization, pricing. labor, and competitive practices to the President of the United States for approval. These plans were called codes, and the President was authorized to prescribe a code for an industry in any given area of the United States that failed to submit one of its own.

When the National Recovery Act was passed, only four states had a sixteen-year minimum for labor. Most of the codes fixed a general minimum age of sixteen years for employment. and the higher minimum age of eighteen for hazardous work. The codes differed widely throughout

the country and local enforcement was often weak and ill-defined; nevertheless, child labor decreased to a considerable extent for a period.

The decision of the Supreme Court in May 1935, that the Act was unconstitutional, abruptly ended the operation of these codes. Child labor again increased notably, the increase running as high as one hundred fifty to one hundred eighty-two per cent in some areas.

The Walsh-Healy Act: Within two years following the nullification of the National Recovery Act, more than thirty bills affecting child labor were introduced in Congress. The most notable were the Barkley Bill, the Wheeler-Johnson Bill, and the Black-Connery Labor Standards Bill. Some of the bills dealt directly and exclusively with the employment of children, while others included provisions concerning minors along with general labor regulations. The Walsh-Healy Bill was one of the latter.

This bill, passed by Congress June 30, 1936, dealt primarily with government contracts in excess of \$10,000, specifying conditions of employment, labor and wages that contractors working on federal contracts must meet. This law is still in effect. Its exact provision pertaining to the subject of child labor is as follows:

"That no male person under sixteen years of age and no female person under eighteen years of age and no convict labor will be employed by the contractor in the manufacture or production or furnishing of any of the materials, supplies, articles or equipment included in such contract."

The various other bills introduced in Congress through 1937 seeking the regulation of child labor contained one or combinations of principles. Some proposed to implement the states to enact uniform child-labor laws on the principle used for legislation in the same vein as the first child-labor legislation; others proposed new child-labor amendments to the Constitution, most of them setting a lower age limit and devising some substitute for the word "labor." In each case legislation along these lines was prevented.

THE 1937 SUGAR ACT

The 1937 Sugar Act had direct application to agricultural child labor. Under its provisions federal benefit payments were denied to those producers of sugar beets and sugar cane who employed children under fourteen years of age or worked children between fourteen and sixteen years of age more than eight hours a day. The protection did not apply to the family of one who legally owned at least forty per cent of the crop at the time the work was performed. But it set a precedent in the case of young agricultural workers not employed on their families' farms. And the

greater portion of young workers in agriculture do not work on the home farms.

In 1941, the provisions of this Act were extended and also amended to provide that the Secretary of Agriculture could make benefit payments notwithstanding a grower's failure to comply with the child-labor provisions, but that there would be deducted from such payments \$10.00 for each child for each day or portion of a day during which such child was employed or permitted to work contrary to the provisions.

Although the beet and sugar cane products are only two agricultural products from a vast array, this is an example of the rather round-about means which federal legislation has had to employ in order to control, and to a very limited extent at that, the youth labor problem in agriculture.

THE FAIR LABOR STANDARDS ACT

The Fair Labor Standards Act of 1938 was the result of a great amount of attempted legislation and controversy pertaining to child-labor laws and labor laws in general. During its consideration by Congress, it was known as the Wages and Hours Bill. Attention was centered on the wage and hour provisions; the child-labor provisions met little opposition.

This Act, passed in June 1938, again embodied Congress' power to control interstate commerce in much the same manner as did the Owen-Keating Bill. However, it has not been overturned and it constitutes a major victory in the battle against child labor. It necessarily leaves to the states the regulation and control of child labor in industries not definable as interstate or foreign commerce; and it does not include coverage of such occupations as the street trades, domestic and personal service, and a considerable amount of agricultural work in which the largest number of children are now employed. However, it does specifically deal with young agricultural workers in several of its sections, and in other ways also its usefulness is not to be minimized.

The measure fixes sixteen as a basic minimum age for general employment in factories and mines producing goods for shipment in interstate commerce. In addition, it excludes minors under eighteen from such occupations covered by the law as may be declared by the Secretary of Labor to be hazardous. Children of fourteen and fifteen years of age may work in covered industries if not manufacturing, mining, and processing occupations.

The conditions of work applying to children of fourteen and fifteen are:

- no work may be performed during school hours;
- when school is in session these children may work a maximum of three hours a day and eighteen hours a week;
- when school is not in session they may work a maximum of eight hours per day and forty hours per week;
- all work must be performed between 7 a.m. and 7 p.m.

By an amendment of August 6, 1942, for the period of World War II, an exception to the foregoing was made to this effect: children of fourteen and fifteen might be employed in perishable fruit and vegetable packing sheds (but not in canneries) until 10 p.m. for a period of not more than eight work weeks in any calendar year.

In this case the following were to apply:

- maximum six-day week; meal period forty-five minutes; no employment on days when school is in session; records to be kept of names and addresses of children employed after 7 p.m. and work weeks in which they are so employed.

Another wartime provision said that children fourteen and fifteen years of age could be employed in cutting pears, peaches and apricots in fruit-drying yards under the following conditions:

- maximum six-day week; meal period of forty-five minutes; fifteen-minute rest period in each half day; provision for seats to be used while working, pure drinking water, washing facilities, toilet facilities; no employment involving exposure to sulfur-dioxide fumes.

Amending the Fair Labor Standards Act of 1938 was not a simple process. Numerous attempts in this direction were either defeated or lost in committees, such as a bill presented in 1941 for the purpose of extending to children employed in agriculture, other than on the home farm, the same protection afforded to children in other non-manufacturing and non-mining occupations. Under the original law, children employed in agriculture, during periods when they are not legally required to attend school, are expressly exempted from the child-labor provisions of the Fair Labor Standards Act.

Under the Fair Labor Standards Act, the Children's Bureau was charged with administering a system of granting age certificates or employment permits to employed minors. In states and territories equipped to administer such a plan in their own geographical areas, the Children's Bureau was empowered to delegate this responsibility to local school authorities, state departments of labor, or state departments of education. At present there are four states, Idaho, Mississippi, South Carolina, and Texas, to which this responsibility has not been delegated. The Child Labor and Youth Employment Branch of the Division of Labor Stand-

ards issues age certificates and employment permits directly in these states because state facilities are either not available or organized to administer such a program.

The Act holds employers of minors responsible for obtaining and keeping on file age certificates and employment permits showing that each minor employee is of sufficient age to engage in the occupation in which he is working. The Children's Bureau drew up a standard recommended form and method of procedure for the granting of work permits which it encouraged the states to adopt.

When conflict arose between individual state child-labor laws and the federal law, the Children's Bureau recognized the law maintaining the higher standards.

Since 1938, a great body of administrative rules and regulations has developed concerning enforcement of the child-labor provisions of the Fair Labor Standards Act. These administrative refinements of the broadly written Act have been necessary to meet the hundreds of perplexing situations encountered in enforcement. Many have been formulated by the exercise of powers granted the Children's Bureau by the Act. For example, telegraph messenger boys were formerly covered by the Act, but in a United States Supreme Court decision on January 1, 1945, the production and transmission of a telegram was held to be not an activity in interstate commerce; therefore, telegraph messenger boys are not now covered by the Act. It has been ruled that occupations in many industries are included within the definition of interstate commerce, thus making them subject to the Act. For example, the manufacture of men's shirts for local sale within a state is considered interstate commerce if even the buttons used are made in another state.

Enforcement of the child-labor provisions of the Fair Labor Standards Act is carried out by regional federal inspectors with business and accounting backgrounds. These inspectors are responsible for all provisions of the Act, not solely the child-labor provisions. Inspections of industrial establishments by means of an audit of payrolls and personnel records and personal inspections of the premises are made periodically. There is an attempt to make at least an annual inspection of every established industry; and, in addition, all new establishments are inspected as they are located. When irregularities in the employment of minors, overtime work, and wage computation methods for overtime work are revealed in industries engaging in interstate commerce, the provisions of the Act are explained to the proprietor and a warning is

given. A follow-up inspection is made in a few months; if violations are found to persist, legal action is taken.

In 1941, the question of the constitutionality of the Fair Labor Standards Act was taken before the United States Supreme Court in the case of the *United States versus Darby Lumber Company*. In sustaining the Act, the Court clearly overruled its earlier decision in the case of *Hammer versus Dagenhart*. Under the 1941 decision, Congress now probably has as much power in the control of child labor as it can attain without complete ratification of the Child Labor Amendment.

In August 1946, when the Children's Bureau moved to the Federal Security Agency, its Industrial Division remained in the Department of Labor. It is now known as the Child Labor and Youth Employment Branch of the Division of Labor Standards. This branch is the administrator of the child-labor provision of the Fair Labor Standards Act and will promote standards in the field of youth employment. The wage and hour provisions are administered by the Wage and Hour and Public Contracts Divisions of the Department.

STATE REGULATORY LAWS TODAY

We have said that all states and all territories have some provisions governing child labor. These laws vary widely in content and application, ranging from a statement in minute detail of the conditions for the employment of minors to the barest legal framework on the subject. Likewise, state child-labor laws vary widely in effectiveness.

Most state laws regulating child labor are closely co-ordinated with the compulsory education laws of the state. In fact, all but two states, Idaho and South Carolina, maintain some sort of accounting procedure to determine that a child is either attending school or working. It is for this reason that laws pertaining to the employment of minors are to be found in either state labor codes, state school codes, or both. Certificates of age are available in all states and in the District of Columbia, Puerto Rico, and Hawaii. In Alaska, birth certificates are used. Conditions for issuing work permits for the full-time employment of children are similar in all states. Certain standard requirements for work permits are most frequently found: all but five states specify a minimum age for employment, only one half of the states require the achievement of a minimum education, and only twenty states require the promise of employment as a condition of granting the work permit. In most states, the local school authorities issue the work permits or age certificates for employed children. However, the county superintendent of schools or

the state labor commissioner is charged with this responsibility in a few states.

Authority for the enforcement of state child-labor laws more frequently than not falls to the state labor department. In some cases, however, enforcement rests with the state department of industry or industrial welfare. Only five states authorize enforcement of child-labor regulations by the state education authority, while fifteen states have made enforcement a joint responsibility of both the state labor department and the state education authority. In practice, enforcement is effected by many kinds of public officials: teachers, truant officers, probation officers, county agriculture agents, sheriffs, factory inspectors, and county judges, to name a few.

Some states have assumed the responsibility for providing a program of rehabilitation of children suffering industrial or other work injuries. Too often the child in need of retraining does not get it. The laws of New York, Oregon and Arizona provide a stipulated amount for maintenance and other expenses incidental to rehabilitation. Virginia fixes a maximum amount at \$800. Every child should be given the opportunity to be retrained at a new job if, because of an accident, he can no longer earn his living at the job he knew.

The child engaged in agricultural labor represents one of the most serious of all child-labor problems. Very little responsibility has been taken by the states for this greatly exploited group. It includes a large number of migratory workers and includes very young workers. Children who should be in school or at play are put into the fields to work long hours at hard and monotonous chores for a pittance of a wage; there is no minimum wage for agricultural workers under the Fair Labor Standards Act. In cases of contract labor, often the employer is the parent. Frequently the child works under conditions detrimental to his health and welfare—his living conditions unsanitary, his environment bad.

The problem of transient children is serious in some states. The abuses to the migratory worker, especially the child, are known to all. The local community feels no responsibility for this group because they are not local residents. Therefore it is especially important that the state assume its responsibility and protect this group of people. Often the state disclaims responsibility because the workers do not have state residence. A child in need of care, and his family too, for that matter, should not be denied it simply because he happens to come from another state.

There is special need for states to enforce school attendance laws,

whether or not the parents of the child are legal residents, and thus accomplish the double object of educating the child and taking him out of the agricultural labor market at least during school hours.

The children of minority groups are especially in need of protection which only the state can give them. Yet despite the urgent need for legal protection, the need goes unmet. There is need for the development of rural welfare services and strengthening of those services now provided. With the development of adequate social services to the rural child, the protection of the child from abuses in the fields and farms will be made easier. More adequate rural educational programs will also help. Rural school truancy laws are frequently not enforced.

WHAT STATES CAN DO

The responsibility of the state lies in passing adequate child-labor laws regulating hours of work, working conditions, pay, ages of children, recruitment of children, living conditions in work camps and homes, and health provisions for the child. The coverage of state laws needs to be complete, bringing under their supervision and control every child who is in the labor market. A central system of reporting should be developed so that states will know about every child that is employed—his age, physical condition, conditions of work, et cetera. There is need for appropriation of adequate funds to permit the effective administration of good child-labor laws. There is need for a revision of methods of bringing the employer who disregards the law to task. He should be prosecuted as the law provides he should be. He should be placed upon probation and further infringements of the child-labor laws should bring punishment. Too often, the payment of a fine means little or nothing to the employer, because the fine to be paid is so small that it can just be charged up to profit and loss, and in effect is not punishment at all.

The laws should be enforced throughout the state and be just, but strictly enforced. In general the minimum standards set up for working children require that state laws provide:

- a minimum age of eighteen for hazardous employment;
- a minimum age of sixteen for all children placed in farm work away from home;
- a minimum age of fourteen or fifteen for work during vacations or after school for any employment;
- a maximum of eight hours a day, and a maximum forty-hour week;
- requirement that a child's schooling not be interrupted for periods of time with certain exceptions;
- special protection for girls;

- elimination of night work, overtime work;
- adequate pay, vacations;
- complete physical and medical examination;
- documentary proof of age;
- work permits;
- establishment of a state agency responsible for child-labor protection, such agency to have copies of all work permits and a registry of all minors employed in the state;
- adequate protection for compensation;
- adequate program of rehabilitation.

ROLE OF THE CHILD-WELFARE WORKER

It is the duty of every child-welfare worker to know the federal child-welfare laws and the laws of the state in which she is working. She should also know whether they are being enforced. She must interpret the laws and the reasons for their enforcement to citizens who, once they understand the need, can and will help to obtain better laws and work for their enforcement.

The child-welfare worker is also in a strategic position to work for improvement in the laws and for a sound employment certificate system. The best rough estimate that could be made in November 1940, after considering such factors as the field studies conducted by the National Child Labor Committee and other organizations, and the number of work permits issued, was that between 750,000 and 900,000 children under sixteen years were still gainfully employed.

The social costs of child labor are briefly:

1. impairment of health, both mental and physical;
2. lack of normal child development which is a result of play and rest;
3. curtailment of education to the point where, often, not even the bare rudiments are absorbed. In 1933, the educational status was this: out of one thousand children who start school,
 - a. one out of every ten never reaches the sixth grade
 - b. one out of every seven never reaches the seventh grade
 - c. one out of every four never reaches the eighth grade
 - d. only one in four children of the school-age population graduates from high school;
4. poverty and unnecessary dependency;
5. delinquency;
6. industrial waste; and
7. social and political loss (loss of potential leaders and good citizens).

INTERNATIONAL EFFORTS

Unfortunately, the first World War interrupted the operation of the International Association for Labor Legislation, with offices in Basel, Switzerland. This organization was quasi-official, was financed by various governments, and collected statistics and published reports. Under its auspices, the Berne Conferences of 1905 and 1906 formulated the first multilateral labor conventions, which prohibited night work for women. Also, the International Secretariat of Trade Union Centers, made up of the national federations of trade unions in nineteen countries, worked closely with the International Labor Organization in promoting legislation designed to improve the working conditions of children; but World War I interrupted this splendid work also. In order to survive, European powers and others too, relaxed their hard-won standards for child labor in order to swell the numbers of industrial workers. In World War II, a similar move took place.

The International Labor Organization, formed as an adjunct of the now defunct League of Nations, gave new hope to those who were carrying on the crusade for child-labor regulation. The International Labor Organization consists of two essential organs: the general conference of representatives of the members, and an International Labor Office controlled by a governing body. In 1919, the General Conference of the I. L. O. met in Washington, D. C., to organize, and since this initial meeting has maintained its office in Geneva, Switzerland, close to the former headquarters of the League. The International Labor Organization is composed of representatives of governments, and of the chief employers' and workers' organizations of member states of the now extinct League.

By 1936, thirty-six nations had become members. The U. S. did not join the I. L. O. until August 20, 1934. The General Conference, meeting annually, or more often, is composed of four representatives or delegates from each member state. Two of the four are purely governmental representatives, while of the other two one is a delegate of labor and the other of capital.

The governing body of the International Labor Office is a kind of board of directors, which directs the personnel and decides what shall be considered at the various conferences. It comprises thirty-two persons: one each from the eight major industrial powers; one each from eight smaller nations (on a rotating basis, every three years); eight elected from the ranks of labor; and eight from capital.

The director, appointed by the governing body, in turn appoints the staff. In general, the staff is organized in sections, of which the main

ones include: Official Relations, Conference, Administrative, Safety, Economic, and Industrial Hygiene. The annual budget, about 9,000,000 Swiss francs, is financed by assessment upon member states.

The functions of the I. L. O. are to draft conventions embodying standards for labor legislation, maintain official contacts with member governments and other member bodies, to collect and publish information concerning labor conditions and legislation in the various countries in general and about child labor in particular. The I. L. O. has also compiled comparisons of national child-labor laws.

The official languages used are French and English, but the more important publications are put out in other languages also. The I. L. O. issues a number of periodicals. The weekly publication, *Industrial and Labor Information*, gives news notes from all over the world and brief reports of the governing body, while the other publications are highly specialized.

Among the major international conventions drafted have been those relating to the employment of children; an eight-hour day; and a forty-eight hour week.

One of the conventions fixes the minimum wages in trades where they were low. Nine countries have ratified this so far.

Another convention sets a minimum of fourteen years for employment in industry, agriculture, and at sea. Twenty powers have thus far ratified this. In addition, France, Italy, Germany, Sweden and Austria ratified but with reservations allowing child employment in case of family poverty.

A convention prohibiting night work in industry by those under eighteen years has been ratified by twenty-five countries, including Great Britain, Belgium, Netherlands, Austria, Poland, Italy and France. Many other conventions have been ratified by from thirteen to twenty-five nations.

The International Labor Organization was instrumental in helping some of the countries of Latin America to enact their first child-labor regulations. Peru, in 1918, had passed its initial child-labor measure; Argentina and Chile came along in 1924; Guatemala in 1926; Brazil and Colombia in 1927; Ecuador and Venezuela in 1928; Mexico in 1931; Costa Rica in 1932.

Speaking in broad terms, it might be said that in many foreign countries, compulsory school attendance keeps the children in school until fourteen years of age; although the laws of some nations excuse younger children if the family is destitute, if the distance to school is too great,

or if the child has attained a certain degree of proficiency. Employment outside school hours is permitted at twelve years. Also, in many countries, it is the general rule not to regulate the hours of minors apart from those of adults.

Canada has fairly progressive regulations. Its Child Welfare Act of 1936 says that those under eighteen shall not be employed between 9 p.m. and 6 a.m. except by a special license issued by the municipality. It also states that no license to work shall be granted to a child under fourteen without written consent from parent or guardian, and that no work license shall be issued to a child under twelve.

Conferences on international labor have been held quite regularly since the founding of the International Association for Labor Legislation in 1900 in Paris. The first International Labor Conference was held in 1919 at Washington, D. C., the twenty-seventh one in Paris in 1945.

In May 1945, child-welfare experts, one each from ten countries and two from Canada, together with representatives of the United Nations Relief and Rehabilitation Administration and of the American International Institute for the Protection of Childhood, met in Montreal at the invitation of the International Labor Office to advise with the office in regard to preparation of material for discussion at the meeting in Paris, France, October 15 to November 5, 1945.

The International Labor Office had prepared a statement as a basis for discussion. This statement gave consideration to health, social protection and maintenance of children; educational and vocational guidance, and problems concerning child labor and employment. It seemed evident that administrative arrangements would vary from country to country due to the political structure, stage of development of different programs and other conditions. However, there was general agreement on the need for comprehensive laws and adequate administrative systems.

When the representatives of forty-eight nations gathered in Paris, October 15, 1945, for the twenty-seventh session of the International Labor Conference, the first post-war session, a prominent place was given to the problems of children and youth. This was significant of the present great international interest in child welfare.

Twelve meetings of the Committee on Protection of Children and Young Workers were devoted to a draft resolution on the protection of children and young workers and another on youth of liberated countries. The text of the first resolution had been prepared after consultation with the experts who met in Montreal in May 1945. This resolution aimed to

present a co-ordinated scheme of various measures for the realization of the essential objectives of the International Labor Organization on the protection of youth, formulated in its constitution in the Declaration of Philadelphia. The draft resolution was approved.

Two other resolutions were adopted—one, to place on the agenda at the next session of the conference, if possible, the question of regulating the underground work of young persons in mines. The other requests the governing body to set up an advisory committee for studying the problems of young workers.

If sound preventive measures could be put into effect all over the world, society might approach the ideal state for the care of its children. They would have an opportunity to be in school and would be given a chance to develop to mental and physical maturity. Let us exert ourselves in this direction!

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PART FOUR: *Guardianship and Protection*

13

CHILDREN IN NEED OF GUARDIANSHIP

WHAT IS GUARDIANSHIP?

Guardianship is an ancient institution. It was used by the family before the time of Christ.

Under Roman law, every child had a guardian. The father was natural guardian and had great authority, the power of life and death over his children. Upon his death, the child was required to have a guardian; this was a tutor in the case of boys under fourteen and girls under twelve, a curator for older children in certain instances.

The history of guardianship in England can be divided into two parts—before 1660 and after. Before 1660, guardianship was largely feudal or borough (town) guardianship, and after 1660 largely by statute. English law in regard to guardianship thought almost exclusively in terms of infant heirs.

Soon after the Norman Conquest, when land holdings became hereditary, the lord of an estate had the wardship of the person and property of his tenants' heirs and the right to arrange their marriages to his advantage (if the heirs were under twenty-one). All male tenants were required to give military service when called upon by their lord. In return, the lord owed them protection of their persons, heirs and landholdings.

English law did not state that all children must have guardians. Appointment was permissive and not mandatory.

In the United States, the thirteen original states made early provisions for orphans and their estates. Guardianship of the person and management of their property, personal and real, were under the jurisdiction of various courts. Specially created courts became accepted to care for guardianship matters. The idea of a spiritual or ecclesiastical court was rejected and common law courts handled probate and equity powers.

With the growth of population, special probate courts were established. By the nineteenth century, most states had brought their various statutes concerning guardianship together in one law. In general, these laws provide for 1. *guardianship under the jurisdiction of special courts*, 2. *testamentary guardianship* (in all states except Iowa), 3. *administra-*

tive details. The only important changes in the last century are restriction of the father's power of testamentary appointment, and removal of the disabilities that women suffered in guardianship matters.

Every state has laws governing guardianship, but from times past, and even today, those children with estates form the majority protected by such laws. Far too much emphasis has been placed upon the preservation of the estate rather than upon the protection and guidance of the child. The elements of guardianship which contribute to the well-being of the child are the presence of an adult who is responsible for his welfare and the existence of property rights which protect him from dependency.

There is no law saying that every child must have a guardian. The protection of a legal guardian usually is not accorded the child without parents, who does not have an estate of a size making legal guardianship necessary; the child without property who is abandoned or neglected, or is without proper care owing to the absence or inadequacy of parents; or the child who has come to the attention of the court for some other reason. Unfortunately, there are no definite means of determining the number of children in need of this protection, or their condition under existing circumstances.

Not only should there be concern as to the number of children without the protection of guardianship, but there should be concern as to the quality of protection given those children under guardians. Are the laws governing the guardian and the ward adequate to promote the welfare of the child? Are the administrative procedures and facilities adequate to insure the child's protection? Are the persons directing and carrying out the administration cognizant of the needs of children and the best methods we now have at our disposal for meeting those needs? What should we do to give all children without parents the best possible protection and care? These are the questions of importance to the child-welfare worker and to the community.

By definition "*a guardian is a person to whom the law has entrusted the custody and control of the person or estate, or both, of an infant, whose youth, inexperience, and mental weakness disqualify him from acting for himself in the ordinary affairs of life.*"* He is responsible to the court that appointed him for the person of his ward and/or for his ward's estate and must observe the laws and regulations governing his office, which is one of trust.

There is no uniformity of state laws covering guardianship. The ma-

*Schouler, James, *Domestic Relations*, 6th ed., Albany, N. Y. Matthew Bender and Co. 1921. I, Sec. 283.

jority of the states adopted English law and have based their laws upon principles incorporated in it, with modifications as expedient. Louisiana is an exception; its laws of "tutorship" stem from the Code Napoleon.

GUARDIAN-WARD RELATIONSHIP

The relationship of the guardian and ward is quite similar to that of parent and child. In fact, it is the legal substitute for that relationship. It differs in that the guardian is not liable for the support of the child, or entitled to the labor of the child. The needs of the child are supplied from the child's estate. Aside from this, the personal and social responsibility of the guardian to his ward which the State requires him to perform correspond to that of the parent. This relationship is for the period of the ward's minority. In California, guardianship of the person ends when the ward reaches his majority, or with his marriage if this is earlier; in either case guardianship of the estate continues until the ward is twenty-one.

TYPES OF GUARDIANS

Natural Guardians: Parents are the natural guardians of their children. Natural guardianship does not devolve upon other relatives. However, this type of guardianship is for the person of the child and gives the parent no power over his real or personal property. It is necessary for the parent to be appointed guardian of the estate by the court in order to assume control of the child's property.

The mother's position as regards guardianship of her children has not always been a favorable one. Statutes giving her "equal" rights or "joint guardianship" with the father are relatively recent. By 1930, thirty-nine states had passed such laws. Under English common law, the father was the sole guardian of his children during his lifetime and could by deed or will place them under the guardianship of whomever he pleased without regard for the wishes or consent of the mother. With her assumption of guardianship rights, the mother assumes obligation to support her children which was not legally so under common law.

Some mention might be made here as to the position of the mother of an illegitimate child. In the United States, and in England, today, the mother is sole guardian of her illegitimate child.

According to the doctrine of *parens patriae* the State has the authority to determine the proper custody of the child. Although social forces are marshalled to keep the child in his own home and to strengthen the family, it is sometimes necessary to remove the child from the custody

of his parents for his welfare. In cases of dependency, neglect, or delinquency the juvenile court is usually delegated the authority to award custody of the children to persons or agencies or institutions as it deems fit. Statutes of the several states say that a parent who knowingly or wilfully abandons or refuses to support his child forfeits parental rights.

The states also modify the authority of natural guardians as *parens patriae* by laws requiring compulsory school attendance and regulating child labor. These modifications govern the authority of appointed guardians as well.

Testamentary Guardian: Testamentary guardianship, as created in England in 1660, provided that the father might deed, will or dispose of the custody of his minor children, and that such disposition superseded all other claims. This form of guardianship is supported by all of the United States except Iowa, but there have been modifications to restrict the power of the father, to give the mother testamentary rights, and to bring testamentary guardians under the supervision and authority of the courts. The guardianship may be of the person, the estate, or both. The authority for it lies with the testator. The office of testamentary guardian is one of trust and cannot be delegated or willed to another. In most states, testamentary guardians may be appointed by the surviving parent, or by either parent in cases where the other parent has abandoned the home or is incompetent.

There are some who hold that the testamentary guardian derives his authority from the will of the parent and that there is no necessity for confirmation or supervision by the court. The view that the testamentary guardian should be under the supervision of the court for the protection of the child would seem the better. In authorizing the guardian to assume responsibility for both the person of the child and the estate, the parent delegates more power to the guardian than he himself possessed, since he could not assume control of the child's estate except by appointment of the court; it is therefore desirable that the guardian be held accountable in the exercise of his great authority. The welfare of the child is the paramount concern of the State, and unless it can supervise, the State can have no assurance that the child's well-being will be maintained.

Guardians by Judicial Appointment: Statute or common law designates which kind of state court shall have jurisdiction over guardianship. The titles of the courts vary: probate, county, orphans', or surrogate's courts. The probate court has jurisdiction in the largest number of states; the county court, in the second largest number. It is discretionary with the court, in each case, whether to appoint a guardian.

In the appointment of the guardian, the court may be guided by statutory provisions specifying the order of the right to guardianship. This is true in California, for example, as follows: 1. the parent, 2. testamentary, 3. one who already stands in the position of a trustee of a fund to be applied to the child's support, 4. a relative, and 5. the probation officer of the court if the child is a ward of the juvenile court.

Other specifications as to qualifications necessary may be included in the statutes. A number of laws require that the guardian be "suitable," a "reputable citizen" or other non-specific words to that effect; such terms are no assurance that the guardian will have all the qualifications needed for protection of the child.

Investigation of Guardian Fitness: All states permit courts to investigate the qualifications of guardians before appointment, but by no means all require the court to do so. Whether required or not, the court should always investigate to satisfy itself of the fitness of the candidate to meet the needs of the ward.

This is of paramount importance. To appoint without knowing that the guardian will meet all requirements of the situation is to make a farce of protection of the child.

An investigation is, of course, of no value unless made by a person or persons qualified to determine the particular needs of the ward and the particular fitness of the guardian to meet those needs.

A questionnaire concerning guardianship laws was sent to directors of state departments of social welfare in April 1942 by S. P. Breckinridge and Mary Stanton. From the answers from the twenty-five states replying, the following information on general procedure as to the qualifications of guardians has been taken:*

Of the twenty-five states reporting, only New York had statutory provisions or routine practice for the investigation of guardians. There, inquiry into the life and circumstances of the minor is required by the surrogate. This inquiry is made by an employee of the court or a child-welfare worker of the local department of public welfare.

Illinois law requires that the guardian be a reputable citizen of the state. Procedure varies with the courts but, with few exceptions, little investigation is done before the appointment of the guardian.

In three states, either the child-welfare worker or the county welfare worker might occasionally be asked to make an investigation for the court.

*Breckinridge, S. P., and Stanton, Mary, "The Law of Guardian and Ward with Special Reference to the Children of Veterans," *Social Service Review*, XVII. Sept. 1943. p. 266.

Oklahoma, Tennessee and Wyoming reported that the statutes gave no qualifications and no investigating was done.

In eight states, the judge's knowledge of the persons applying for guardianship was the main safeguard.

Variation was found in preference of persons for guardianship. Alabama, Louisiana, and Washington gave relatives preference, while North Dakota placed them in fourth place and Wisconsin reported that corporations were said to be preferred by the court as guardians of the person as well as of the estate.

Guardian Supervision: In the questionnaire here mentioned, inquiry was made as to the supervision of the placement of the minor wards. It was found no provision was made for the placement of them in licensed foster homes or for licensing the home of the guardian if the ward resided with him.

It is accepted policy that the child who is old enough should be consulted in the appointment of a guardian. Under common law, the age of fourteen involved full criminal responsibility and terminated the old forms of guardianship; nurture and socage. Today, too, the age of fourteen is significant, inasmuch as the minor at that age may, in most of the states, petition and nominate his own guardian who must be appointed by the court if found suitable. In twenty-two of these states, the child of fourteen has the right to nominate even in cases where the court may previously have appointed a guardian.

A California decision declares that, under the code of that state (Code of Civil Procedure, secs. 1748, 1750), "a minor on arriving at the age of fourteen years has an absolute right to nominate a non-testamentary guardian to displace one already placed, even though the displaced guardian may be one of his parents, the question of the nominee's suitability alone coming under the discretion of the court."

The advisability of such a provision as California's is questionable. Certainly the child should be consulted as to his preference, but to allow the discretion of the court to be limited to such an extent by the selection of an inexperienced adolescent is debatable.

Hasseltine B. Taylor, Lecturer, School of Social Welfare, University of California, Berkeley, expresses the opinion that without supervision of a disinterested sort, change of guardians on the nomination of the fourteen-year-old is questionable.* She goes on to state:

"A change of custody requires a sound social decision based on knowledge of all the factors in the case and an interpretation of the

*Taylor, Hasseltine Byrd, *Law of Guardian and Ward*, Chicago, Ill. University of Chicago Press. 1935. p. 5.

child's needs as a whole rather than in one particular regard. A social case worker attached to the court, representing the interest of the state in a relationship which the law makes possible, and giving continuous supervision could supplement and guide the guardian and the ward in such a way that the ward would not desire a change from one guardian to another. The fact that children do, in many cases, wish to change guardians signifies that the relationship has not satisfactorily served in the place of the relationship of Parent and Child."

Guardians ad Litem: This type of guardianship is of a temporary nature in contrast to the other types discussed. Such a guardian is frequently appointed for a specific purpose in the absence of a permanent guardian. The powers and duties are limited to the particular purpose for which appointment is made. "Consent to adoption, to medical care, to entrance into the armed forces, or to marriage may be given by a guardian for a child whom he has never seen until the moment he was appointed by the court."* Such guardians may be appointed to represent children in court. They may also be appointed, even though there is a permanent guardian, in the final settlement of an estate, the sale of real property, or the mortgaging of real estate.

The appointment of such guardians in a careless fashion for making decisions vitally affecting the life of the minor is fraught with danger for the minor. However, guardians *ad litem*, if carefully selected, do serve useful purposes in the settlement and handling of estates.

Public Guardians: The office of public guardian exists in ten of the forty-eight states to meet needs which the laws on guardian and ward do not cover. He is a county official who serves as guardian temporarily or when no one is able or willing to qualify. While there are no uniform methods for appointing this officer, in all states he must take oath and give bond in varying amounts. Under the statutes, the public guardians "are governed by the same statutes, have the same powers and duties, are subject to the same liabilities, receive the same compensation . . ., and may be removed for the same causes."† Often banks and trust companies serve as guardians, usually of the estate. They invest the funds and manage the estates of their wards and collect fees as guardians. Since 1933, estates under \$5,000 deposited in banking institutions are protected by federal legislation.

As the office now operates, it is not a satisfactory arrangement. However, some such office within the state department of welfare might be developed so as to serve children satisfactorily.

**Op. cit.*

†*Op. cit.*

Guardianship of the Estate: The duties of the guardian to the ward in the guardianship of the person are not of such a nature as to be easily set down in the law. His duties and powers in the guardianship of the estate are such that they may be and are set down quite specifically.

The guardian is bonded so as to insure the estate against loss through his handling. In some states, he may be bonded by a bonding company; in others, he may register personal sureties with the court as bond. It is vital to the protection of the child that the bond be adequate to cover the amount of the estate and that check be made to keep it so by regular accounting and inventory to the court. Such safeguards act as a deterrent to the guardian who might be tempted to break his trust and to speculate with the ward's estate or appropriate it to his own uses.

It is the practice for the court to approve the expenditure made for the ward out of the income of the estate after such expenditure has been made. No provision is made for supervised planning in advance of the expenditure. Such planning could be used as a check against the accounting, with provision for flexibility to take care of unforeseen needs.

Guardian Compensation: Compensation of the guardian is usually in proportion to the income of the estate. It is sometimes fixed by statute as a percentage, but more often it is left to the discretion of the court. The fixed percentage clearly stated in the statute is considered to offer more protection to the ward than does the discretionary amount fixed by the court.

Termination of Guardianship: Although guardianship usually continues until the ward reaches his majority, most states provide that the tenure of a particular guardian may be terminated for good reason upon substantiated complaint. California statutes provide that the guardian may be suspended for abuse of trust, waste or mismanagement of the estate, failure to file inventory or render accounting within the time allowed, failure to perform duty, incapacity, gross immorality, having interests adverse to faithful performance of duties, removal from the state, insolvency of the estate, and termination of the need for the guardianship.

The court that fails to supervise the guardian adequately and depends on the filing of a complaint and proof by an interested person to disclose the incompetence of guardians, gives the child a bare minimum of protection. Many persons who know of abuses by guardians hesitate to bring complaint in behalf of the wards because they fear the possibility of involvement in suits.

At the termination of guardianship, the whole period of guardianship

should be reviewed by the judge at once, so that any loss can be recovered by the ward before jurisdiction leaves the court. Review by the judge is advisable because the ward himself may not be able to understand his affairs despite his attainment of majority. The judge should see to it that the guardian, in addition to turning over the estate, explains to the ward, in his presence, the condition of the estate and any advice regarding it.

NEED FOR UNIFORM GUARDIANSHIP LAWS

It is the consensus among writers upon the subject that the laws and administrative procedures pertaining to guardianship need a general strengthening and overhauling so as to provide more adequate protection for all child wards, regardless of whether an estate is involved. Enactment of uniform laws of guardianship and clarification as to which courts have jurisdiction are plainly required.

The revised laws should state intelligently and clearly the qualifications for guardians and their powers. For a case involving an estate there should be provision for prompt inventory; adequate bond; annual, supported accounting; supervised planning before the fact of expenditure; protection against unwise investment or other mismanagement. The compensation of guardians should be specifically stated, and provisions for the time and terms of final settlement should also be incorporated in the law. It is desirable that some degree of mobility may be effected with safety by a provision for the prompt transfer of records from one jurisdiction to another so that the costly and lengthy initial procedure of appointment need not be repeated.

The ward should not be left unprotected for long periods after the probate of the will, as is now the case in many instances. A temporary arrangement could be authorized by law, pending the appointment of a nominee. Some means of notifying the court of the death of the surviving parent should be prescribed by law so that action may be taken promptly in the appointment of a guardian.

To enforce such legislation there must be, of course, adequate facilities and personnel for successful supervision and investigation. A graphic account of the difficulties and evils arising from inadequacies in this respect is presented by Mary Stanton in her report on the administration of guardianship in a probate court in Illinois.* The facilities and personnel needed would logically be an arm of the court having jurisdic-

*Stanton, Mary, "The Administration of Guardianship by a Local Probate Court." *Social Service Review*, XIV. Dec. 1945, pp. 495-505.

tion. While this might not be feasible in rural areas where the volume of such cases would not warrant the employment of full-time personnel for supervision, other resources in the community might be employed.

The county child-welfare worker might well be utilized. This has been done successfully in an Oregon county.* Alice Scott Nutt urges that social supervision be apart from the authoritarian atmosphere of the court inasmuch as such a function is incongruous with the function of the court and would be better received by the community away from the court.† But, if such separation should be made, the lines of authority and responsibility should be clear to all persons and agencies concerned.

Facilities and personnel for the critical examination of guardians' accounts and reports on the estates of their wards are also essential to better guardianship.

CHILD BENEFICIARIES OF OLD AGE AND SURVIVORS' INSURANCE

Under Title II of the Social Security Act as amended in 1939, benefits are provided for children of sixty-five-year-old retired insured wage earners and for children of persons who die fully or currently insured under the plan. To be eligible the child must be under eighteen, unmarried and must have been "dependent" upon the wage earner. For the most part, "dependency" is presumed and is not predicated on support by the parent. The approach is a negative one. For example, a legitimate child is always deemed dependent on his father or adopting father. He would be ineligible only if living with, and being supported by, the stepfather and even in such situation he would still be eligible if the father made regular contributions to his support. The situation which controls is the one existing at the time of death of the wage earner and the fact that the stepfather later supports the child does not stop the benefits.

The amount of the benefit for the child, whether the worker retires or dies, is one half of the worker's "primary benefit." The "primary benefit" is based on the average monthly wage and length of service of the wage earner. The benefit is figured by taking forty per cent of the first \$50.00 of the average monthly wage, and adding ten per cent of the balance not exceeding \$200.00. Then one per cent of this total is added for each year in which the worker was paid \$200.00 or more in jobs covered by the law. The total monthly benefits that may be paid to a family on

*Juras, Andrew F., and Lewis, Verl, "Child Welfare Services and the County Court." *Social Service Review*, XVII, June, 1943. pp. 175-187.

†Nutt, Alice Scott, "Social Service Functions in Children's and Family Courts." *The Child*, V. Nov.-Dec., 1940.

one worker's account, while never less than \$10.00, may not be more than twice the primary benefit, or eighty per cent of the worker's average monthly wage or \$85.00, whichever is the least. The average primary benefit in 1946 was around \$25.00.

If the child works under Social Security and earns over \$14.99 in any month, the child's benefits are suspended for that month. The child's benefits terminate at age eighteen, when the child marries or if the child is legally adopted by someone other than a stepparent, grandparent, aunt or uncle subsequent to the death of the worker.

The Social Security Act was amended in August 1946 and provision was made for children of veterans of World War II who die within three years after their discharge from the service. Children of such veterans are guaranteed the same benefit rights they would have enjoyed had the veteran died fully insured under the Old Age and Survivors' Insurance system with average wages of not less than \$160.00 per month, and the veteran is presumed to have been paid not less than \$200.00 in wages in each calendar year in which he had thirty days or more of active service after September 16, 1940. This provision applies even though the veteran may have never worked in covered employment. However, the guaranteed insured status is not available if the survivors of the veteran are paid a pension or compensation by the Veterans Administration. However, if the veteran had an insured status based on covered employment before or after his military service, benefits are payable regardless of whether payments are also made by the Veterans Administration.

As of October 31, 1946, there were 482,546 child beneficiaries of Old Age and Survivors' Insurance on the rolls entitled to a total of \$6,045,200 per month. Of the 1,828,486 beneficiaries on the rolls as of October 31, 1946, twenty-seven per cent were children and ten per cent were widows caring for child beneficiaries. Benefits in current payment status to all types of beneficiaries at that time amounted to \$30,374,100 per month. Payments for one child averaged \$12.50 a month. In many cases where there were several minor children in a family the maximum of \$85.00 per month was being paid.

To get the benefits, an application must be filed on behalf of the child. In the ordinary case where a worker dies and leaves a widow with minor children, the benefits on behalf of the children are paid to the mother unless facts are brought to the attention of the Social Security Administration which would indicate that she is not a responsible person and cannot be trusted to expend the benefits for the children. Where there is no parent surviving, payments will be made to a close relative who as-

sumes the responsibility for the child. In either event, if a legal guardian has been appointed, the payments will usually be made to the legal guardian but the Social Security Administration does not require legal guardianship. Careful consideration is given to any planning a social agency may be doing for a child in making the determination as to the payee. Where a responsible relative is not available to serve as payee for the child, payments may be made to a social agency on behalf of the child. All records of the Social Security Administration are kept confidential.

If there is dissatisfaction with the decision as to the amount of benefit or eligibility, there is the right to appeal such a decision; and if the final decision is questioned, there is the right to have a judicial review of the case.

The following changes in the law are suggested in order to eliminate discrimination against child survivors who cannot receive benefits under the present plan even though their source of support has been lost by the death of the major breadwinner:

1. In the case where the father has not been the major support, award benefits to the child on the basis of the wage record of the deceased mother or other relative who, until death, supported the child. Under the present law a child is not considered "dependent" upon his mother, adopting mother, stepfather or stepmother if the father or adopting father is living with the child or contributing to its support.

2. Continue payments of survivors' benefits to children after their adoption, regardless of the relationship of the adopting parents to the children.

3. Award benefits to illegitimate and foster children of the insured deceased if dependency is established. Under the present law only illegitimate children who are legitimated or recognized under state law for inheritance purposes are eligible.

4. Increase the amount of the benefits in view of increased living costs.

5. Extend the plan to workers in occupations not now covered by the system, such as agricultural workers, domestics, the self employed, et cetera.

6. Benefits to children should be paid during periods of extended or permanent disability of the individual who had been their major support.

UNIFORM VETERANS' GUARDIANSHIP LAW

The lack of national policy and supervision of guardians of beneficiaries of the War Risk Insurance program led to widespread abuses of guardianship after World War I. There were misuse of funds, embezzle-

ment, and mistreatment of wards. These conditions were brought to the attention of the Veterans Bureau by the American Red Cross, the American Legion, and the Disabled American Veterans. The demand for some supervision grew, and there was considerable debate whether this was a state or federal function. The compromise view was to leave with the state courts power to appoint guardians and to give the federal government supervisory power over them. Weak legislation to this effect was passed in 1924.

The American Legion and other service organizations recognized the need for uniform legislation which would make the (federal) veterans' administrator in each state an agent of the state courts. They sponsored legislation to this effect which was drawn up by the Commission on Uniform Laws in 1928 for consideration by state legislatures. At that time, the Veterans Bureau stated it was disbursing approximately \$40,000,000 annually to some 50,000 guardians on account of 52,000 beneficiaries under guardianship. Of the wards, about 23,000 were incompetent veterans and 29,000 were minor children of disabled or deceased veterans.

When the Uniform Veterans' Guardianship Act was first devised, a compromise was made in that guardianship was left to the jurisdiction of the local courts, but the Veterans Bureau would supervise the estates by supplying the machinery necessary for its administration. As first adopted there was not the necessary machinery or authority to make action effective. Amendments to the Act and the development of a more adequate division of guardianship within the Veterans Administration formerly the Veterans Bureau have in some measure brought about correction of the abuses.

The Uniform Act provides that the supervision and appointment of guardians is left to the local courts, but the U. S. Veterans Administration which pays the benefits is a party to the guardianship proceedings. Social workers of the Veterans Administration staff are assisted by service organizations such as the American Legion and Red Cross in supervision.

Guardians appointed under the Uniform Veterans' Guardianship Act do not differ from any other court appointed guardians. The administration of these laws offered the only attempt so far toward uniformity and utilization of social work in connection with guardianship.

Guardianship is the responsibility of the Office of the Solicitor of the Veterans Administration. The legal division is responsible for safeguarding the estates of incompetent or minor beneficiaries. The solicitor is directly responsible to the veterans' administrator.

Chief attorneys in each regional office are responsible to the solicitor for guardianship services in that region. He has authority to determine when a guardian is required and supervise all guardianship activities in the regional territory. The chief attorney may decide whether payments shall be made through an institutional or apportioned award or to the person having custody of the child, in cases where there is no guardian or payments to guardian have been suspended for failure to comply with the law.

There is no provision in the Act to safeguard the person of the ward. Such supervision is left to the local community. With no clear line of responsibility established and a split supervision, the danger is that there will be no supervision of the guardianship of the ward. A uniform social service program is needed to overcome this difficulty.

WORKMEN'S COMPENSATION—DEATH BENEFITS TO MINOR DEPENDENTS

In a survey made by S. P. Breckinridge and Mary Stanton* to discover requirements of guardianship for the minor recipients of benefits from Workmen's Compensation under the death benefits for dependents the following was found:

New Mexico reported no statutory requirements for guardianship. Wyoming's compensation is administered by the courts and the appointment of a guardian is at the discretion of the court. Nevada proceeds on the assumption that its only responsibility is to meet the financial obligations of an insurance program. Florida reports investigation of parents and custodians by office interviews and letters of reference with appointment of an attorney to disburse funds if the surviving parent or custodian is not found suitable.

Eleven states report that the commission requests appointment of guardians by the probate court under different circumstances.

North Dakota requires that every beneficiary under sixteen have a guardian appointed by a probate court.

Amounts of more than \$100.00 in Indiana and \$250.00 in New Jersey require guardianship.

Utah requires guardians in the event of a lump sum payment.

Oregon requires guardians for beneficiaries not living with their natural or adoptive parents.

This bears out the pattern of lack of uniformity found in the matter of guardianship in the several states.

*"The Law of Guardian and Ward with Special Reference to the Children of Veterans." *Social Service Review*, Vol. 17, Sept. 1943, pp. 265-302.

PRESENT STATUS AND RECOMMENDATIONS

Guardianship laws under which we are operating were written many years ago and need review. If the children now under guardianship and those who will be, are to be safeguarded, these laws will have to be re-examined. Often, however, it is the administration of the law that permits abuse. The need for a change in guardianship law and administration is obvious. No important changes have occurred in the past hundred years except the extension of certain rights to mothers.

The numerous differences in the law of guardianship from state to state have little justification. Lack of uniformity does not mean that any one state has a superior system of guardianship. The differences have arisen historically and developed either by chance or through pressure of special interests. The laws of every state are inadequate to meet the needs of present-day conditions.

It is generally conceded that a uniform law on guardianship to be effective should include the following:

1. requirement of a guardian for every child;
2. clear designation of the court of jurisdiction and the court of appeals;
3. definition of the rights, duties, and functions of the various guardians;
4. requirement of bond from all guardians, the amount determined on inventory of the estate;
5. specific directions for annual accounting;
6. requirement of court proceeding at time of final settlement;
7. rate of compensation for guardian;
8. explicit directions for removal of guardian;
9. requirement that resources be provided the court for selection and continued supervision of the guardian;
10. uniform social service program.

Other suggested improvements of guardianship include:

- a. All courts having jurisdiction over guardianship should be equipped with social and administrative services.
- b. Guardianship procedures should be prompt and comprehensive.

Testamentary guardians should be subject to the same requirements and liabilities as other guardians. They should be required to qualify and meet the court approval immediately after the death of the surviving parent, instead of waiting three to six months for the will to be probated.

Supplementary services to the probate court should include: social services performed by qualified children's workers; property service performed by salaried (never free) lawyers and auditors.

Funds were authorized by Congress in August 1945 to the Children's Bureau for the purpose of making a study of conditions surrounding children under guardianship. The results of this study have stimulated interest for definite action to bring about some of these needed reforms.

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14

CHILDREN WHO BECOME DELINQUENT

The term "juvenile delinquency" means many things to many people. There is no generally accepted definition. In the legal sense it means any act or conduct that brings a child within the jurisdiction of the juvenile court. Most juvenile-court laws in their definition of delinquency include violation of a state law or local ordinance and acts or conduct likely to endanger the morals or health of the child himself or others; examples are running away from home, being beyond the control of parents or guardians, being found in questionable places or associating with immoral persons. Sometimes that which constitutes delinquency in one juvenile-court law is included in the definition of neglect in another.

We know that the acts for which children are brought into juvenile courts range all the way from mere mischievousness to the most serious offenses that can be committed by either child or adult. We know too, that many social agencies and child-guidance clinics deal every day with children whose problems are as serious as those of children who come before the juvenile court. Chance, the economic resources of the family, and the social resources of the community often determine whether or not a child gets into juvenile court.

It will give more meaning to our discussion if, instead of thinking of "juvenile delinquents," we think more specifically of boys who steal automobiles, who enter homes or stores to steal, who pilfer from ten-cent stores; of boys who organize in gangs to steal, destroy property, or terrorize neighborhoods; of boys who, while not intending to do harm to individuals, nevertheless do things that may endanger their own lives or those of others, such as playing with fire and tampering with railroad equipment; of girls who run away from home to seek excitement, or to get jobs that will give them "a lot of money," or to follow and be near boy friends who have moved; of girls who steal to get pretty clothes; of girls who become sex delinquents and sometimes prostitutes; of both boys and girls who rebel against parental authority to an extent far beyond what is normal to the adolescent youth; and of boys and girls who seek adventure and excitement in unwholesome ways such as drinking, using drugs, and frequenting questionable places of entertainment. All of these are classified by some as "juvenile delinquents"; actually they are individuals who must be considered apart.

Just as it is hard to define, juvenile delinquency is difficult to measure. We have no nation-wide statistics. No count is available of the children whose acts might be classed as juvenile delinquency but who are dealt with by their parents, schools, or social agencies and never come to the attention of the police or juvenile court.

Nor are accurate figures available to show how many come to the attention of the police. The Federal Bureau of Investigation collects and publishes statistics of arrests from fingerprint records. But since laws in many places prohibit the fingerprinting of juveniles, these statistics do not include many children who come to the attention of the police. In the main, moreover, the FBI's figures relate to the upper-teen-age group above the ages of juvenile-court jurisdiction.

Nor are nation-wide statistics available for children dealt with by juvenile courts. The most comprehensive figures for delinquency cases handled by juvenile courts are those reported to the U. S. Children's Bureau by courts that co-operate in the Bureau's plan for the collection of juvenile-court statistics. The figures reported by eighty-three courts, each of which serves an area of 100,000 or more population, throw some light on recent changes in the amount of juvenile delinquency that comes to the attention of juvenile courts. The total number of delinquency cases brought before these courts increased from about 65,000 in 1940 to 75,000 in 1942, an increase of almost sixteen per cent.

Cases of girls always constitute a smaller proportion of the total cases reported to the Bureau than do those of boys. The percentage of rise in girls' cases, however, was greater than in boys' cases: thirty-eight per cent as compared to eleven per cent.

CAUSES OF DELINQUENCY WITHIN THE INDIVIDUAL

The present-day attitude toward the juvenile delinquent is growing more constructive; the delinquent child is coming to be regarded as a sick child. He has failed to secure in his life so far the satisfactions and recognition necessary for his adjustment to standards of the community. The more deprived and unsatisfactory his life experiences are, the harder he must struggle to make up for them. His behavior is an effort to solve his own emotional needs.

The first opportunities he has for this adjustment are in his own home and these are controlled primarily at first by the mother. In his early months he must learn certain disciplines as to what he can and cannot do; when, where and to whom. These disciplines he can accept if, at the same time, he feels assured of the love and security of his parents. If

the child in his early growth period does not have this parental acceptance, if he feels himself as an unloved or unwanted person, then he can only respond by securing for himself certain substitute pleasures in an effort to compensate for a lack of parental warmth. Because he is insecure in his own family, he is unable to love and relate himself to any person sufficiently to make a personal adjustment to social standards. This early pattern of family relationship carries over into his contacts with school, church and community.

Any adventure or situation is welcomed if it offers him an escape from the hurt of lack of love and loss of pride; any substitute for affection will do if it offers thrill, excitement and a feeling of adequacy. His behavior is an expression of protest against the lacks in his own life.

This conflict within himself or between himself and his environment explains why one child in a family may indulge in delinquent behavior when his brothers or sisters do not. Children born to the same parents never experience identical family situations; age of parents, financial condition, order of birth, family responsibilities, and many other factors contribute to difference. Although a child may have all material things money can buy, inner conflicts may drive him into asocial behavior.

It is often loosely said that juvenile delinquency can be blamed on poor health, poor housing, poverty, and poor neighborhoods. Studies show that the stresses and strains occurring in a child's emotional life are more important than any of these. Although other conditions serve as contributing factors, it is the neglected, unloved, emotionally deprived child who is least able to resist destructive influences and is most susceptible to opportunities for delinquency.

CAUSES OF DELINQUENCY WITHIN THE FAMILY

If we are to consider intelligently the reasons for the behavior of a child who is labeled a juvenile delinquent, we must examine closely the needs that must be met by a child's own home and parents. Has he had two present, understanding, and affectionate parents; a home in which he could receive good physical care? Could he admire and build ideals around his parents? What of the spiritual values of his home? Has he had the security of familiar surroundings and a constant family circle? Long intervals of absence of one or both of his own parents from the home, or of the child's living in a school or with relatives during early life, tend to have an unsettling effect on a growing child and discourage the formation of solid habits of self-discipline. Inconsistent or overstrict discipline deter the child's formation of any code of right behavior.

Bickering, groundless complaints, nagging—all these symptoms of parental rejection contribute to rebellion of the child and to his desire to escape from unpleasantness and look for acceptance and affection outside his home. The delinquent is not the child, but the adult who has failed in the early life of the child to give him that combination of love, security and discipline that is needed to help him grow up to wholesome adulthood.

Does poverty in the home contribute to delinquency? It can, but usually through circuitous rather than direct means. In various ways economic hardship may promote and encourage theft. If the income is so low that extreme frugality is necessary and a child does not fully comprehend the reason for deprivation, he may resort to dishonesty and deceit to satisfy natural desires.

The accompaniments of poverty most conducive to juvenile delinquency are probably overcrowded living quarters and lack of space for wholesome play. The total lack of privacy in the home results not only in physical discomfort but in emotional irritations and tension. The lack of decent recreation space means that streets and alleys are the only areas where children can play, or the older boys and girls can meet.

If there are enough positive elements in the environment of a child to give him emotional stability, he can face even the knowledge that his father is serving a prison sentence or that a mother is a prostitute without going to pieces.

COMMUNITY SHORTCOMINGS

Near business districts of every growing city, areas of deterioration tend to develop. Physical and social structures decline; leadership and institutional functioning become deficient.

Low-rent and unzoned subdivisions on the outskirts of cities tend also to become cankered areas. In both of these areas children live in daily proximity to tawdry poolrooms, saloons and movies, to houses of prostitution, gambling "joints," gang "hangouts" and other spots where the dregs of the community gather. The behavior of a child exposed to these surroundings may certainly be influenced by what he sees in his immediate neighborhood.

THE SCHOOL AND THE DELINQUENT CHILD

Is there anything in our school system that could be a causative factor in delinquency? The obvious failure of some of our schools to take into account and make adequate provision for individual differences is one of

the main errors. When classes are set up on a rigid basis of chronological age, the abilities of different children are disregarded, and some are placed at a disadvantage. Although the child, in almost every instance, has had considerable contact with other children before entering school, it is usually here, for the first time, that he must learn to bend his individual wants to the desires of a fairly definitely organized majority rule. In the school, moreover, the child usually meets competition for the first time in a way that is serious to him.

The school means to the child his first great venture in class-consciousness. It becomes necessary to answer questions as to who he is, where he lives, what he possesses, and what he can do. Unless he can answer in a way to meet his own emotional need for status, compensatory behavior of a negative nature may develop.

Obviously a teacher in daily contact with a child may do much to help him to adjust, and thus perhaps prevent future trouble, if she is trained to recognize signs of behavior difficulties in their early stages and to act intelligently regarding their implications. The classroom is a splendid place for spotting children with problems so that they may be helped before their maladjustment can lead them into court.

CHILD LABOR AND DELINQUENCY

From studies thus far made, it appears that working children have contributed more than their share of problems to the juvenile courts. This is notably true of children working in street trades and in domestic service; a higher percentage of these come before the courts than do children employed in other occupations. However, there are dangers in all child labor, not least of which are the enervating and detrimental effects of employment involving cumulative fatigue and overstrain. Migratory labor holds its special problems; the frequent change of neighborhood adversely affects the child, leading to non-attendance in school and a feeling of impermanence, and tending to make the child ripe for delinquency.

Local officials should be constantly on the alert to protect working children from exploitation and from employment in occupations that threaten them with moral hazards. Any violations should be reported to state enforcement officials.

RECREATION—ONE DETERRENT OF DELINQUENCY

Lack of play space and of sufficient facilities for recreation often result in children "just hanging around" soda fountains, drug stores, pool-rooms, bars, vacant lots and street corners.

Ideally, every child should have within easy distance parks, playgrounds, hiking trails, and social centers where he may participate in dancing, dramatics, table games and music.

PRESENT METHODS IN TREATMENT OF DELINQUENCY

Juvenile Court: The juvenile court is an American product, but the legal principles manifested by it may be traced centuries back to the English system of common law and equity. The responsibility for and care of all minors and their estates were vested in the king who, in turn, designated the chancery to act for him. As guardian, the king earned the title *parens patriae*, father of his country.

In this country, when the colonies attained independence, each state took the place of the crown as the *parens patriae* of all minors.

Of significance is the controversy to determine whether the juvenile court is wholly of chancery origin or of criminal origin. Some authorities argue that it is of criminal origin since crime and delinquency are based upon intent. Yet this complicates matters since delinquency, as one classification, and neglect or dependency as another, fall within the categorical periphery of the juvenile court.

Juvenile Court Philosophy: In theory, the basic philosophy of the juvenile court has been that of rendering aid, protection and care to dependent and delinquent children. Only when the punitive factor has been submerged are the courts able to deal with children constructively. Only by eliminating the substance of fear so commonly associated with criminal procedures is it possible to deal intelligently with every child in conflict with society.

The obvious failure of the criminal procedure adequately to protect delinquent children necessitated a new humane approach. This may be best expressed by one of the points of the Children's Charter endorsed by the White House Conference on Child Health and Protection in 1930, which emphasized that every child in conflict with society has the right to be dealt with intelligently as society's charge, not society's outcast.

Many authorities in the field of juvenile delinquency disagree on the meaning of "juvenile court." The term is simply one of description, not derivation. It is axiomatic that the juvenile court is not a court of equity or a common-law court, but rather a statutory court. A juvenile court may be broadly defined as a court having special jurisdiction of a parental nature over delinquent and neglected children.

History of Juvenile Court: The advent of the juvenile court was not spontaneous. It was an outgrowth of, and inextricably tied to, legislation

of the past. For example, English laws based on the reform of juvenile offenders were enacted as early as the tenth century. Nine hundred years later, Britain's Juvenile Offenders' Act of 1847 was enacted to govern the trials of all children under fourteen years of age. Legislation was adopted in Switzerland during the first half of the nineteenth century curtailing publicity against children involved in court cases. In South Australia, the chief secretary in 1889 approved the granting of probation and the holding of separate hearings for children under eighteen.

The various steps which led in America to the creation of the juvenile court began in the early decades of the nineteenth century. One by one there appeared, in statutes, certain specific features of a juvenile court, such as that of separate confinement, separate hearings, and probation. A reform movement against confinement of juvenile offenders with adult criminals resulted in the establishment in 1825 of the House of Refuge in New York. As early as 1869, a Massachusetts law was passed providing for the presence of the visiting agent or an officer of the state board of charity at the trial of juvenile cases.

The plan of restoring young offenders to good citizenship under supervision of the court, without confinement in an institution first took statutory form in Massachusetts in 1878. Similar in many respects to this 1878 law for probation, though more limited, was a law of 1861 authorizing the mayor of Chicago to appoint a commission before whom boys between the ages of six and seventeen could be heard on charges of petty offenses. About that time Michigan organized a state agency for the care of juvenile offenders and New York gave birth to a law which allowed the courts discretionary power to place juvenile offenders in the charge of suitable persons or institutions willing to receive them.

As a result of a movement initiated by the Federation of Women's Clubs in Illinois, the legislature of that state enacted the first juvenile court law in April 1899. It was officially styled "An Act To Regulate the Treatment and Control of Dependent, Neglected and Delinquent Children." The Act did not create any new or special courts; it simply indicated that in counties whose population exceeded 500,000, the circuit court judges should designate one or more of their members to hear all juvenile cases. It also provided for a separate juvenile court room and separate records. The title "Juvenile Court" was given for the purposes of convenience only.

On September 12, 1899, the legislature of Colorado passed the famous "School Law" which, though in reality a truancy law, contained some of the features of the present-day juvenile court laws. It was mainly due

to the indefatigable efforts of Judge Ben B. Lindsey, author of this law, that the Colorado Juvenile Court Law was adopted some four years later.

The spread of the juvenile court movement since 1899 has been phenomenal. It has extended throughout the country and to most parts of the world. In the United States there are some 3,000 juvenile courts, no two of which are exactly alike.

The history of the juvenile-court movement contains much of the struggles of great men, such as Judge Lindsey in Colorado, who have unselfishly aspired toward reforms in which they planned to save children in preference to punishing them.

In the early days of the juvenile court, it became obvious that court procedures had to be modified and adapted to accomplish the objective for which it had been founded; to help, not punish, the child. Before it was able to become thoroughly oriented in these new procedures it was loaded with additional duties such as the development of clinical and social services to meet the needs of the children with whom it dealt. We still find juvenile courts that handle administrative functions, providing direct care and treatment for children, perform police functions, enforce ordinances when children are involved, accept complaints directly, take custody, and in some places assume leadership in casework with children.

The lack of social services within the community was the reason why the court developed such services as a part of its own organization, and this development was the reason why it later fell heir to responsibility for administering measures dealing with the care and protection of the dependent child.

At present the soundest philosophy would indicate that there should be a separation of the judicial and casework functions of the juvenile court, with the court retaining responsibility for judicial action, and a social agency assuming responsibility for casework. The court, no matter how socialized its procedure, still remains a court with its own structure and function, and should not be placed in the position of having to serve as a social agency.

Many juvenile courts now try to limit their intake to cases where judicial action is required. They recognize that cases of dependency and neglect need not be brought into court unless problems of custody or wilful neglect are involved. They realize that communities even today closely associate the juvenile court with the criminal court and punishment.

The handling of official cases in a juvenile court, no matter how

socially minded its judge or how well trained its staff, follows this judicial procedure: 1. apprehension of the child, on receipt of complaint, 2. filing of petition, 3. detention, 4. social investigation, 5. summoning of witnesses, 6. hearing, 7. making of an order.

If there were a definite division of function between juvenile court and social agency, some children would go directly to the agency, with no need for judicial action; others, following necessary judicial decision in their cases, would be transferred to the social agency for care and treatment. Reasons for this seem obvious, since the delinquency of the child usually stems from family, community or school situations and there is need for dealing with these larger problems before the child can make a satisfactory adjustment. These problems may take intensive and long-term treatment of a kind provided by a good social agency. The fact that a particular juvenile court does not administer treatment services does not mean that it is unsocialized or inadequate.

Social agencies generally, within the past few years, have accepted responsibility for treatment and casework functions formerly handled by juvenile courts and have made available to the courts services attendant upon the exercise of judicial functions. This has relieved the courts of extraneous duties and enabled them to render more effective services in their own field of expertness. As courts and social agencies have worked more closely together, the courts are placing emphasis on well-qualified intake supervisors to determine whether a case belongs in court and, if not, to refer it to the appropriate agency. This reduces the number of cases assigned to probation officers and permits more effective services to the people they serve.

DETENTION

Detention is usually presumed to be the care of children, outside the home, pending disposition by the court.

It is usually considered best to allow the child to remain in his own home until he is to appear or to be brought into court for hearing. Obviously, however, the child cannot be left in his own home if the court fears that he will not appear, or that his parents cannot be relied upon to bring him into court, or that his home is an unsuitable or unsafe place. The home cannot be used if its influence contributes actively to the delinquency or the need for care; if the parents recognize the child is beyond home control; if the child's offense is so serious that allowing him to live at home would endanger public safety.

There are other cases, also, in which detention is necessary. It is used

in the cases of children who have run away from other communities and are to be returned home; in the cases of lost children, homeless children, foundlings, children awaiting admission to other institutions; those on probation with unsuitable homes; feeble-minded children. Children who are to be used as witnesses in criminal cases are sometimes detained under court jurisdiction.

Detention is one of the procedures of the juvenile court, and laws setting up the court state, generally, that a suitable place for detention of its wards shall be provided and maintained at county expense. Suitable facilities for detention of children are, however, generally lacking. City and county jails are still used for this purpose; many jails lack provision for segregation of adult and juvenile offenders. An effort has been made in a number of areas to use, for detention care, foster homes carefully selected on the basis of the child's needs.

Detention care should be used as one method of treatment for the child. Instead, it usually becomes a method of punishment rather than a therapeutic experience. When a child is placed in detention care, there is a crisis in his life. Detention generally means to him the denial of his rights and needs, a denial out of proportion to the seriousness of his behavior. He may interpret detention as further rejection by his parents and the community. The general use of detention, as it now exists, serves to increase hostility, anxiety and defensiveness and may result in more serious behavior disorders.

Careful planning can change all this. It can transform detention into a resource which will decrease unhealthy repressions and substitutions that might lead to further complications in his personality development. Temporary care can be used to provide an auspicious setting for the study of the child and his problems.

Since the child is usually "picked up" by the police, it is important that police understand his emotional needs during periods of detention. Special training is given in many places to police officers for juvenile work, both in methods of handling the children who are in difficulty, and in the prevention and control of conditions that contribute to delinquency.

INSTITUTIONS FOR JUVENILE OFFENDERS

Correctional institutions have been operating in the past and in the present on the principle of mass treatment centering in a generalized program. There has been little attempt to meet the individual needs of each child but rather he has been placed in a specified grade in school, assigned to some type of work in the shops, instructed in his religious

faith and allowed to participate in the recreational program. This program has been unloaded on the child and he is obliged to take part in it regardless of individual differences. Usually, under such a system, we find that more money has been invested in the buildings of the institution than in the salaries of the personnel; therefore, an inadequate and poorly trained staff carries on a program designed to punish instead of rehabilitate these boys and girls.

Until recently there had been very little progress in creating a program which would treat the delinquent in the institution as an individual who had conflicts which he aggressively expressed against the community. Even today most of the work done is in the embryonic stage.

The time spent in an institution should be used for intensive treatment and training directed toward creating new social attitudes, establishing vocational competence, developing legitimate leisure-time interests and restoring or maintaining physical health.

We know that rehabilitation will depend mainly upon the extent to which the child's treatment and training are geared to meet the particular problems he presents. Most essential then is the selection of a well-trained and competent staff who can recognize and understand individual differences and plan a constructive and progressive program for children sent to a correctional institution.

It is of interest to note suggestions made to a committee studying correctional institutions by a boy who had spent time in one. He said:

"The name 'correctional school' is a farce because nine out of ten times they don't correct, they aggravate. Boys may be back three or four times; that shows there is no correction.

"Educational programs are usually a joke. The vocational training is usually whatever is required to keep the institution running—plumbing, carpenter work, and things like that. They also put boys wherever work is needed without consideration of what job a boy might have the most skill in doing.

"I realize the program of an institution can't be better than the personnel to carry it out. They should pay better salaries and get better people to train the kids.

"When a boy gets out, there should be some method of paving the way between the boy and his family (if he has one), his community and employer or school. Otherwise he will be back in the institution again."

CONSIDERATION OF JUVENILE DELINQUENCY LAWS

The laws relating to delinquency and delinquents are important not

only because they stake out the range of treatment possibilities but because they express in a sense the general lay point of view in a given state with respect to the child deviate and nonconformist. One sees in these laws the two-fold and at present conflicting objectives of the state: the determination to protect its property and its social groups, and at the same time to insure protection and treatment for children who have broken the law.

Apparently the delinquency laws are based on the age-old objectives of penology, i.e., 1. "protection of society," 2. "deterency" and 3. "reformation of the individual." One is forced to the conclusion that society has paid such exclusive attention to the first objective that the second and third, particularly the third, have been forgotten or ignored.

It is obvious from a social point of view that any revamping of these laws should be guided by a conviction that the best interests of the group (i. e., "protection of the state") lie in a well ordered program aimed at the reform or rehabilitation of the individual. This is to say essentially that the old objectives of penology should be reversed, to all intents and purposes, making "reformation of the individual" the first objective.

A study of the laws of the forty-eight states reveals certain common inadequacies and points needing clarification which should be the object of reform. Foremost among these are:

1. The disparity in many states in the age limit between boys and girls. If there is to be an arbitrary age limit to indicate when one is and is not a "juvenile," it seems unreasonable that there should be a difference in this respect between boys and girls.

2. Lack of clarity as to the reason for setting any given age limit for juvenility. In most states this limit is sixteen, seventeen or eighteen. In any state this should be reviewed frequently and a decision as to age limit made on the basis of the existing and possible facilities for the care of each age group, the staff and quality of work of the public and private agencies in the community, and the status of the children's court. Probably a more fruitful objective than raising the existing age limits would be a concentrated attempt to socialize the courts handling young people of the age groups above the juvenile court range, and to work out a concurrent jurisdiction plan between the children's and adults' courts whereby cases might be handled in either court without rigid restrictions as to actual age.

Terminology: The present terminology of the laws is based almost entirely on strictly penal conceptions. Most states attempt to name offenses, social situations, moral conditions, etc., which constitute "delinquency." They would be on firmer ground if they considered the child ahead of his actions and substituted such phraseology as "a child whose personal, social or mental problems give indication after

careful study that he needs the protection and care of the state. Such a child shall be known as a ward of the state and shall be entitled to the most skillful diagnosis, treatment and care which the state can give."

There is lack of definite provision for the social treatment of children who have committed serious offenses against persons. Under the present law a child murderer is usually handled in an adult court. It is possible in most states, however, for the district attorney to turn over such cases to the children's court for disposition. This or some other procedure should be clearly defined and specific policies established to care for such emergencies.

YOUTH CORRECTION AUTHORITIES

The American Law Institute is an unofficial body that met in Washington, D. C., in 1940. A model Act called the Youth Correction Authority Act was drafted by that body in the form of a proposed bill which could with local modification be introduced into state legislatures. The work that went into the preparation of the model Act represented a progressive step in the treatment of a group of youthful offenders under twenty-one years of age.

This model Act proposed that these youths when convicted in a criminal proceeding be committed to a state agency which takes full charge of their correctional treatment. The Authority must establish its own diagnostic clinics and approve or create detention homes or other facilities for correctional care. The basic philosophy of the members of the Institute was that rehabilitation must be substituted for punitive treatment.

This Act provides an indeterminate treatment measured by the social danger of the offender to the community. Its aim is to restore the offender as quickly as practicable to society.

In 1941, California adopted the Act in a limited form. Later amendments broadened its area of concern to include the whole subject of delinquency prevention and research, and the word "correction" was dropped from the title of the State Act and of the agency it established. California is the only state so far to adopt such an Act although in some other states the Act drafted by the American Law Institute has had the indirect effect of modifying the court procedure in dealing with youthful offenders.

JUVENILE PROBATION

What is juvenile probation? It is difficult to give an exact answer to this question. States vary in the setting up of the age limit at which one may still be entitled to consideration for probation as a juvenile. Many

states set the maximum age at eighteen years, but there is a growing tendency toward increasing the maximum age and some states such as California have increased the age to twenty-one years. Another consideration is the type of offense; many states do not provide for juvenile probation where the offender has committed certain crimes such as murder or serious bodily assault.

Usually in the granting of probation for juvenile offenders the suspension of sentence applies before the sentence is imposed; whereas in adult probation often the sentence is pronounced but the execution of the sentence is suspended in favor of probation. In some states the probation officer is empowered to grant probation to a juvenile without the necessity of the filing of a petition or a court hearing. However, some states have this provision for adult offenders also, and the net result is that there is no clear-cut line of demarcation that separates juvenile probation from adult probation.

In actual practice, much that is called juvenile probation is only so because, at the time it is granted, the offender is under the jurisdiction of a juvenile court. Theoretically, probation work that is good for juvenile offenders is equally applicable to adult offenders.

The term "probation" is derived from the Latin word, *probare*, which means "to prove." Today probation still implies this meaning, for it affords the individual offender a chance to prove himself. That is, society through the use of probation recognizes the fact that many offenders, given the opportunity, are capable of mending their ways without the necessity of a prison sentence or similar disciplinary measures.

Probation may be defined from a legal viewpoint as a suspension of sentence, giving the offender the opportunity to improve his conduct while continuing to live in the community but reserving the right to sentence the individual if his conduct becomes unacceptable to the court. However, most authorities in using the term probation insist that supervision of the offender after the suspension of sentence must be applied if the full meaning of the word is to be realized. Mere suspension of sentence without supervision of the offender is not recognized by these authorities as probation, despite legal definitions to the contrary.

EARLY PROBATION PROCEDURE

Probably the first concrete example of probation as we understand it today was practiced by John Augustus, a Boston shoemaker. John Augustus may well be called the first probation officer. As an unpaid volun-

tary worker, he undertook to save from degradation individuals whom he found in the Boston courts; this he did from 1841 until his death in 1859. John Augustus started by seeking probation for common drunkards, but later extended his services to individuals guilty of other crimes. In 1843, he entered the field of juvenile probation through his taking juvenile delinquents under his unique and pioneering probation system.

John Augustus enjoyed tremendous success with his young charges. To quote Sheldon Glueck, "Without the assistance of a psychiatric clinic and social workers, he seems to have accomplished much good. Certainly his contact with children was more sympathetic and sometimes more understanding than that of some probation officers of a number of so-called juvenile courts today.*

The success of John Augustus with juveniles laid the foundation for the growth of special services to juvenile offenders. From 1861 to 1867, Chicago had a commissioner to hear cases of delinquency in boys; he had the authority to place the boys on probation. The Massachusetts Acts of 1869 and 1870 provided for the supervision of juvenile delinquents by agents from the Board of State Charities.

In 1878, the first official law in the country to make probation an official service was passed. This law empowered the mayor of Boston to appoint a probation officer in Suffolk County.

In 1891, state-wide probation was attained in Massachusetts when it was made mandatory that each municipal, district and police court appoint a probation officer. Maryland became the second state to pass a probation law, this in 1894. Vermont followed in 1898.

The following year was a momentous one in juvenile probation development. Rhode Island passed a general state-wide probation law. Minnesota passed legislation to provide probation for juvenile offenders making no provision for adult probation at the time. However, the greatest significance of the year of 1899 was to be found in the state of Illinois, where the first juvenile court in the country came into being. Since the establishment of the juvenile court in Illinois, probation for juvenile delinquents has progressed rapidly. By 1939, forty-seven states had made provisions for juvenile probation.

PROTECTIVE SERVICES FOR DELINQUENT CHILDREN

The juvenile police and the juvenile courts are authoritative agencies. They are expected by society to serve a useful purpose in protecting the

*Glueck, Sheldon, and Glueck, Eleanor. *Preventing Crime, a Symposium*. 1st ed. New York and London, McGraw-Hill Book Co. 1936. p. 509.

community and the individual. Agencies that are specially designated as protective societies must also exercise authority in their approach to the family. There seems to be considerable confusion over what appear to be inconsistencies between 1. the casework concept of self-determination and self-direction of the individual and 2. the necessity for taking authoritative action, without consent of the individual, which may effect change that he does not want.

All casework help is actually directed toward providing an opportunity for an individual to see his problem more clearly, face it and determine what he wants to do about it. There is no conflict between authority and casework, when the authority is constructive. The wise parent uses constructive supportive authority. The wise agency recognizes when this type of help is necessary.

The protective agency gives a service to children who are neglected or abused by their parents or guardians. This service is initiated on the basis of a complaint. This is one of the first steps to consider. When a person goes to the police to make a serious complaint on which he wants action, it is necessary for him to swear out a warrant and give proper identification; this places the responsibility for his action upon the complainant. Most protective agencies accept complaints without insistence on name and address; this places responsibility on the agency. The worker who makes the initial call may have difficulty in finding a helpful approach when, prior to the time she invades the home, she knows little of the actual situation; she may not know whether the complainant is an irascible neighbor, a jealous parent or a spiteful landlady.

If the functions of the protective agency and what constitutes actual neglect or abuse of children were clearly defined and interpreted to the community, more careful consideration might be given to the filing of a complaint and less community pressure might be exerted for speedy action by the agency, such as immediate removal of a child from his home. The complainant should be told what the agency can and cannot do, and also its methods of procedure. He should also be made to know that the agency will protect the identity of the complainant.

As in all casework, the first interview with the family sets a pattern for future work together. The parents are entitled to a frank statement of the complaint. There should be no threat or censure, but a focus on the needs of the child and what is good and bad in his present situation. The realities that the parents must face should be made clear to them. Specific information must be given them concerning the functions of the agency in the community and how the agency works. Casework in

this situation as in others must initially be directed toward strengthening family life.

The agency must have the confidence, respect and support of the community in its work of rehabilitating the child's home. Given this, it can then give the parents the support needed to see them through a difficult experience. Well-directed authority may be the thing the parents need most.

Parents may resist the intrusion of outside help. Their fear, guilt, or feeling of inadequacy would make this a logical reaction. The worker understands their resentment, but if she can approach the family with the conviction that the agency can offer service that will help both family and child she will not feel that effective casework cannot be carried on in an authoritative agency.

Sometimes a child comes to the agency to make a complaint against his parents or his home. This situation calls for special objectivity and an awareness that the agency cannot afford to ignore the rights of parents prior to a careful investigation of the child's story. If court action becomes necessary, the worker comes to court as a representative of the protective agency and of the community; if she has used sound casework methods throughout, she can have the comfort of knowing that she has done everything within her power to make it possible for the child to remain in his own home.

CHILD GUIDANCE CLINICS

Too often a child whose overt behavior is indicative of emotional difficulty is left untreated, and later becomes the child we term "a juvenile delinquent." Children do not ask for help and protection except through their symptomatic behavior.

The child-guidance clinic is an attempt to bring together the resources of the community in behalf of children who are seriously at odds with their environment, or in distress because of unsatisfied inner needs, and whose difficulties are revealed in unhealthful traits, unacceptable behavior, or inability to meet social and scholastic expectations.

The clinic's service is rendered through the direct study and treatment of selected children by a team consisting of a psychiatrist, a psychologist and psychiatric social workers, and also through focusing the attention of physicians, teachers, social workers and parents on the mental-hygiene approach to problems of child behavior. The essence of this approach is that behavior is studied objectively, without bias or prejudice, to discover the causes—usually multiple—which produce it, and that an effort is made to modify it by eliminating or alleviating the causes.

In adopting the title "child-guidance clinic," the clinic has given a restricted meaning to a term having wide application; for parents, schools, courts, medical and social agencies of various types have long been engaged in guiding children. Child-guidance clinics have attempted to provide guidance where the services of these agencies are not sufficient to meet the child's need. The clinics offer a synthesis of techniques, which are more effective in combination than they could be singly. But they can put their combined resources at the service of only a handful of children. Their only hope of wider accomplishment is in strengthening the capacity of other elements of the community to carry day-by-day responsibility for child guidance in its broader sense.

The functions of the child guidance clinics are threefold: 1. they study and treat patients; 2. they seek to interest other community agencies in the prevention of behavior and personality disorders in children; and 3. they attempt to reveal to the community, through the first-hand study of individual children, the unmet needs of groups of children. Some clinics provide training for students of various professions, chiefly psychiatry and social work.

The clinical unit is usually headed by a physician specially trained for the practice of psychiatry. Associated with him is a psychologist trained particularly in the technique of measuring and evaluating, with special reference to formal education. The team is completed by psychiatric social workers trained in the analyses of social situations and the social treatment of emotional and behavior problems.

START OF MENTAL HYGIENE CLINICS FOR CHILDREN

Prior to 1922, there were only a very few mental hygiene clinics devoting much time to children. In 1909, Dr. William Healy founded the first psychiatric clinic planned specifically for children, the Juvenile Psychopathic Institute of Chicago. This clinic was connected with the Juvenile Court of Chicago and was the first clinic for children in which the psychiatric, psychological and social approaches were combined.

Dr. Healy was interested in searching out the causes of delinquency and in finding ways of preventing children from developing into adult criminals. Each offender coming to the clinic was studied from the medical, psychological and social points of view. Dr. Healy served as physician-psychiatrist and was assisted by psychologists who gave mental tests and probation officers who obtained social histories. The child was regarded as the product of the forces which had been reacting on and within him, and the findings of the Institute showed the close relationship between the child's emotional life and his delinquency.

The clinic was financed for the first five years (1909-1914) by private funds and from 1914 to 1920 by Cook County. In 1920, it was renamed the Institute for Juvenile Research and was taken over by the state of Illinois; its services were extended to cover a wider field of child guidance.

Judge Harvey H. Baker of Boston, one of its students, urged the establishment of a similar clinic to serve the Boston Juvenile Court. When he died his friends established the Judge Baker Foundation Clinic in 1917. Dr. Healy, with Dr. Augusta Bronner, his assistant, left the Chicago clinic in care of Dr. Herman Adler, who had come from the Boston Psychopathic Hospital, and went to direct the Judge Baker Foundation, later renamed the Judge Baker Guidance Center.

Two other centers in which the foundations of child guidance were being laid down were the Boston Psychopathic Hospital which established a clinic for children in 1912, and the Henry Phipps Psychiatric Clinic established at the Johns Hopkins Hospital in Baltimore in 1913. These two clinics included psychiatric social workers on their staffs, thus setting the precedent for the three-fold approach of the clinic. They also set the pattern for serving the whole community rather than just the juvenile court.

In 1915, a clinic was opened by the Allentown State Hospital in Allentown, Pennsylvania. This had as one of its original purposes to serve as a clearing-house for the public schools of all children suspected of being in the exceptional class, securing for them diagnosis and prognosis, and advising what environment and course of action would serve the interest of each individual child.

The Ohio Bureau of Juvenile Research was established in 1915 as a division of the State Department of Public Welfare and set a precedent for direct state responsibility in the care of psychiatric problems of children. Its original purpose was to study delinquency, its causes and motives and work for their eradication or correction.

Dr. George F. Inch of the Kalamazoo State Hospital in 1916 persuaded the judge of the Grand Rapids Probate Court and the county commissioners to pay the expenses of a traveling clinic that would examine children on referral from the court. Not much beyond diagnostic service was offered.

NATIONAL COMMITTEE FOR MENTAL HYGIENE

While the foundations of scientific child guidance were being laid in the centers mentioned, related developments were taking place elsewhere

in the psychiatric field. Young physicians were receiving training in the newer dynamic concepts of mental disorder; were acquiring a broader understanding of their patients, and were learning to take an interest in family, school and community settings as conditioning factors.

This growth was accelerated by the establishment in 1909 of the National Committee for Mental Hygiene, with a program which included efforts for better care of the insane and education of the public to a deeper understanding of the nature of mental disorders and the need for preventive measures. The committee's work included surveys of the care and treatment of the mentally deficient as well as the mentally disordered, and studies in delinquency and neuroses.

The beginning in 1918-1919 of formal training in psychiatric social work at the Smith College and the New York School of Social Work was forced by necessities of World War I.

The development of child-guidance clinics was accelerated and strongly influenced by demonstrations conducted by the National Committee for Mental Hygiene, through the Division on Behalf of the Commonwealth Fund, a private foundation established in 1918.

In 1920, the Fund had asked Henry W. Thurston, of the New York School of Social Work, to formulate a plan for work in child welfare. A temporary advisory committee, including representatives from the fields of psychiatry, psychology, education, social work, and the juvenile court was also formed. The recommendations of this committee and of Mr. Thurston were considered by the director of the Fund and a program dealing with methods for the prevention of delinquency was worked out. This program, planned to cover a five-year period, was adopted in November 1921 and initiated early in 1922. The major purposes of this program were:

1. to develop psychiatric study of difficult and delinquent children and sound methods of treatment based on such study;
2. to develop the work of the visiting teacher;
3. to provide courses of training for those qualified to work in the child-guidance field;
4. to extend the knowledge and use of these methods.

To carry into effect the first three of these purposes, the Fund availed itself of three agencies recognized as leaders in their respective fields:

The New York School of Social Work was enabled to offer additional courses for psychiatric social workers and visiting teachers, to provide fellowships in this field, and to establish a psychiatric clinic known as

the Bureau of Child Guidance for the study and treatment of children presenting special problems and for the field training of students.

The National Committee for Mental Hygiene was enabled to establish a Division on the Prevention of Delinquency through which demonstrations of "psychiatric work in the diagnosis and treatment of children coming from the juvenile court" were to be given.

The Public Education Association of New York was enabled to set up an organization known as the National Committee on Visiting Teachers, equipped to conduct demonstrations of visiting-teacher work in a number of cities.

The Fund set up its own agency for the carrying out of the fourth purpose, called the Joint Committee on Methods of Preventing Delinquency, a co-ordinating agency for the program as a whole, and as an interpreter of the work through published articles or special studies.

In the program as formulated by the Commonwealth Fund, the juvenile court was seen as a point of psychiatric attack on delinquency. In 1922, announcements explaining the program, its aims, the scientific basis of the work, and its expectations, were sent to two hundred twenty-five juvenile courts, and published in appropriate periodicals. The Division offered a demonstration service which would examine and treat problem children, demonstrate methods and values, and help with organization of permanent clinics to follow. This offer was dependent upon a certain degree of interest and upon promise of permanent local support for the work. Replies came from thirty-four courts, thirteen requesting the service, and five stating that such a service was not needed.*

Demonstration clinics were established in St. Louis, Norfolk, Dallas, Monmouth County in New Jersey, Minneapolis, Los Angeles, Cleveland and Philadelphia.

GROWTH OF MENTAL HYGIENE WORK

During the five-year demonstration period, child-guidance clinic service in the United States had increased, partly as a result of that program, about four times. In the eight clinics permanently established as the direct result, the pattern of child guidance had been clarified. The focus of professional attention had shifted from delinquency and the court to the more subtle evidences of non-adjustment in the home and the school. Means of linking the clinic with the community had been learned. The

*Stevenson, G. S., *Child Guidance Clinics—A Quarter Century of Development*. Commonwealth Fund. New York, N. Y. p. 21.

mutual responsibility of clinic and social agencies had been revealed and effective methods worked out. Financial policies had been shaped by failures and successes. Channels for educational opportunities were worked out.

In 1927, at the end of the demonstration program, the Commonwealth Fund decided to continue advisory service to cities which sought aid in establishing child-guidance work. It changed its name from the Division on the Prevention of Delinquency to the Division on Community Clinics.

Its task was to help communities to realize their programs in the soundest and quickest way, and to discourage inferior endeavors posing as child guidance—to aid in the maintenance of high standards.

The clinic of today is functionally an agency for bettering the adjustment of children to their immediate environment, with special reference to their emotional and social relationships, to the end that they may be free to develop to the limit of their individual capacities for well-balanced maturity. This is done in two ways: 1—the direct study and treatment (by a synthesis of psychiatric, psychological social work, and, to some extent, pediatric techniques) of children whose lack of adjustment has become evident to some or all of the adults concerned with their welfare; 2—the spread of those concepts and attitudes which are lumped for convenience under the heading “mental hygiene” throughout the agencies responsible for child care—the school and home, the social agencies and courts. The clinic teaches by serving some children and, by teaching, serves all children.

For its financial support, it looks to the sources commonly used by social agencies—the Community Chest or private donors. Its budget, in cities of 200,000, before the 1930's, was something over \$20,000 a year. Its staff includes a full-time psychiatrist who acts as executive head, a full-time psychologist, two or three full-time psychiatric social workers, and two or three clerks. With this staff, a clinic may be able to accept something over three hundred new cases a year.

The clinic selects for study and treatment children of normal intelligence whose difficulties are traceable to emotional imbalance, whether in the child or parent; or to a lag between the child's capacity and the demands made upon him, of which educational maladjustment is an example; or to destructive influences in the social environment. Children are brought to the clinic because of unacceptable behavior—disobedience, stealing, lying, temper tantrums, truancy, and the like; because of personality problems such as nervousness, inattention, shyness; because of school difficulties—poor work, retardation, indifference, etc.; or be-

cause some crisis in the child's life—transfer from a broken home, for instance—makes it desirable to have an analysis of his capacities and qualities as a guide for constructive action. Clinic cases show an unusually high proportion of children with I. Q.'s both above and below the "normal range."

Children are referred to the clinic chiefly by social agencies, schools, courts, parents and relatives.

The interchange of experience and technique between the child-guidance clinic and other social agencies takes place through the medium of the co-operative case; the agency refers a problem to the clinic, the agency worker takes part in the initial conference and usually carries through the bulk of treatment processes agreed upon.

In addition to this intensive teamwork, provision is usually made for briefer contact between the clinic staff and the social personnel of the community through observation visits to the clinic and through short courses given by the clinic staff for agency workers. The clinic influences public opinion chiefly through the schools, social agencies, and physicians with whom it co-operates on cases, and to some extent by lectures and courses of instruction for parent-teacher associations and child study groups.

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PART FIVE: *Substitute Care*

15

FACTORS THAT INFLUENCE TYPE OF SUBSTITUTE CARE

Present Attitudes: There is a growing recognition of the fact that both the foster home and the institution have a definite place in an overall child-care program.

Until about 1917, orphanages were recommended whenever youngsters presented problems to society. Beginning that year and gaining momentum in the next three decades, a shift from the use of the institution to the use of the foster home for substitute parental care occurred. This was due to increasing knowledge of the needs of children and a consequent reaction against institutional care which in the main did not seem to meet these needs. The movement went so far that institutions were tolerated only when no foster home was available.

Then foster homes also proved to have their serious weaknesses. It therefore became necessary to reconsider both the role of the institution and the role of the foster home. Figures from the United States Children's Bureau (1941) indicate the following distribution of children outside parental homes:

Dependent children in foster homes	150,000-170,000
Dependent children in institutions	100,000-110,000
Children in schools for delinquents	30,000
Children in homes for mentally deficient	20,000
Children in residential schools for blind, deaf, and crippled	30,000

These statistics indicate that magnitude alone merits attention to the circumstances of selecting institutional placements. The pendulum started to swing back toward a middle position on the arc between the two extreme attitudes. We now realize that the question is not one of institution versus foster home, but rather what kind of substitute care is best for the growth and development of each particular child. Institutions exist because there are children who need the type of care offered in group living. Foster home care, on the other hand, provides more nearly the "own home" situation in which the majority of children feel more secure and as a consequence free to grow and develop physically, emotionally, and socially.

While the needs of the child should guide us in any placement deci-

sion, we often find that the type of resource immediately available is the determining factor. It is well, therefore, to review what we have to offer the child needing substitute care.

In the foster home field, we know of the difficulty of securing the proper type of home, the shortage of homes, and the high rate of turnover in homes, which make it difficult to give a child the security for which placements strive. A great deal must be done to educate the public with respect to foster home programs and the lines of demarcation must be more clearly drawn between those types of problems which can be lessened by foster home placement and the types in which foster home placement may intensify the problem rather than resolve it.

As far as institutional care is concerned, we here do not find a shortage, but a surplus—in fact, “the crux of the problem is that there are too many institutions and too few that are properly orientated.”

Most foster care, whether in institutions or foster homes, has been seriously inadequate. The low board rates paid foster parents and the meager salaries paid institution workers are not commensurate with the services expected and this fact often has prevented the selection of the kind of substitute parent a child needed. Those engaged in providing foster care for children have a grave responsibility in making sure that the basic and special needs of each child are met and that he is placed in the setting most capable of meeting these needs. To perform this duty best, the child-welfare worker, in addition to knowing well the child, his problems, and his background, must have a knowledge of both foster home and institutional facilities.

WHEN DO WE USE A FOSTER HOME?

Certain general principles will be outlined here to answer the question: when do we make an institutional placement and when a foster home placement? However, the appropriate placement for each child must be decided on a skilled casework basis according to the needs of the individual child. Among the factors which should determine where a child's welfare can best be achieved are the nature of the child's relationships to his own family, the strength and permanence of the emotional ties which bind him to them, as well as his age, physical and mental condition, temperament and habits.

We know that some parent-child relationships cannot be adjusted to a natural home, and that some cannot be adjusted to any placement situation. We know that substitute care is not good for every child, but on the other hand we cannot believe compulsively in the family at all costs.

There seems to be fairly complete agreement on the fact that "young children" need the anchorage and affection that can only be secured by the experience of belonging to one person. The "young child," therefore, should not be placed in an institution. However, there is some difference of opinion with respect to the age limit below which a child should be classified as a "young child." Some would classify a child in this category as one below three or four years; others would include all the pre-school years; some feel that all children under seven or eight fall into this group; still others believe that the term "young children" refers to all children in their pre-adolescent years. However, there is a consensus that institutional living is too complex for the child under six, since it tends to be a continuous group experience for him.

An interesting description of how a small child regards the institutional experience is given as follows by a psychiatrist:

"So much picking up and turning over and putting down and pushing there and pulling here; so much coming and going not by one but by many—that some (children) seem ever rushing forward to get the next grab at that which is dashing by for the next ward or cottage . . . and other children in their rebuff seem forever in retreat and in search of something never found and finally are obliged to curl up in a deserted nook and cuddle for dear life a ball of yarn or some cast-off garment in the hope that in turn this too may be the evasive maternal anchorage recaptured."*

In general, family life in a foster home is to be chosen for nearly every child capable of forming new family relationships. It is desirable for all children under six and has been found practically a "must" for infants.

WHEN DO WE USE AN INSTITUTION?

In contrast to the very young child, children between the ages of approximately six and twelve may have something to gain from an institution. During these years, adults become diminishingly important and competition and co-operative relationships with other children grow. The adult never quite disappears from the picture, however. Children during these intermediate years may be discussed in relation to certain behavior patterns which they have developed.

Generally institutions can best serve the following groups:

The child, who, because of illness or accident involving the parents, must be temporarily out of his home but who has such an emotional tie with his parents that it is difficult for him or them to accept foster

*Chamberlain, H. E. "Group Living as the Essential Contribution of the Institution." *California Children*. Vol. 1, No. 7. July 15, 1938.

parents. This child responds better in the impersonal atmosphere of an institution.

The adolescent who is going through the period of breaking away from his own home and finds a foster home so repressive he cannot take root in it; or because he is disappointed in adults whom he loves, dares not relate to other adults. Because of this he sets out to prove the foster home is bad and foster parents intolerable. In such instances, institutions are advisable.

The child with behavior problems that are not understood and with whom the average foster-parent cannot cope. For this child, the institution may be used as a study home where, in an objective, sympathetic situation, his temperament, desires, habits, and ideas may be observed in order that treatment and a permanent beneficial plan can be worked out. An institution thus used must be equipped to give skilled services and relate these to the day-by-day life of the child.

The child in need of convalescent care in cases where he can profit from group life. For this child institutional care must combine the advantages of group life with individualization. Many parents feel their own status less threatened by institutions because they believe that the change in environment is the important factor, and thus that the need for placement is not their fault. The alcoholic or feeble-minded parent who makes a foster home placement too difficult for all concerned obviously makes institutional placement preferable.

In addition to the groups of children mentioned, the three following groups are considered to progress favorably in institutions:

1—The physically handicapped child (blind, deaf, epileptic, crippled). Partly because it is difficult to find foster parents willing and equipped to take handicapped children, and partly because special training is necessary for teaching the handicapped, it is recognized that institutional care is valuable for this group. A program planned and operated for the specific needs of the crippled, blind, epileptic, and deaf supplies special training to broaden the capabilities of those afflicted.

2—The low-grade feeble-minded. High-grade subnormals, however, must be treated on an individual basis and only a small percentage need be in institutions.

3—The advanced delinquent who has become a menace to himself and to the community. The institution can be used for study, observation and treatment of those children for whom a greater degree of skill in carrying out treatment is necessary than the placing agency is able to find in a foster home.

Foster home placement is a constructive alternative to a child's own home under certain conditions, as when:

—there is obvious need due to illness of mother, with no available resources; death of parents; alcoholism or feeble-mindedness of parents;

—a parent projects her own emotional problems onto a child and cannot be helped to see her part in the child's problem;

—a parent and child, despite the understanding of what separation means, find that they must endure it because they cannot work out their problems in a family unit;

—a parent requires separation from her child to work out alone what she feels she must do;

—a parent's sense of inadequacy is due to an identification with her own inadequate parents, and is too deeply rooted to yield to casework treatment;

—a parent's untreatable immaturity precludes the minimum of security-giving to her child;

—parents' unconscious motivations dominate their relationship to the child. As an illustration, the unresolved resentment against having to share the spouse with the child as in childhood they had to share one parent with the other parent.

Equally important are instances of when not to place. A mother who will prevent any satisfactory placement is the mother who insists on immediate placement because her ambivalence makes her fearful that she may not carry out her decision if she were to have time to think it over. Then there is the parent, guilty because of rejection of her child, who vacillates between lavishing affection and showing outright rejection. She cannot tolerate affection between herself and the child, and at the same time she prevents the child from relating to a foster mother. A placement in such a case is likely to result in failure.

With the ominous array of when a worker does "this" and when she does "that," when to place and where and how, it takes courage to "play God" in the light of our present-day understanding and participate actively in separating a child from his home and determining the best method of substitute care for each individual child.

Neither the institution nor the foster home should be regarded as the only form of care. Changes in the child's needs or his situation may necessitate interchangeable use of both forms.

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16

FOSTER HOME CARE

Meaning of Foster Home Care: In spite of the fact that money is available for aiding dependent children and that agencies believe children should be kept in their own homes if at all possible, there are situations in which foster care for children must be resorted to or is preferred by parents.

A child may be placed in a foster home because his home has been judged unfit and his parents have been deprived of his custody; because his home has been broken by divorce, desertion, or death; because he has been exhibiting behavior problems which could not be coped with in the family environment. Frequently, a child under two years may be placed in a foster home because both of his parents are employed.

In any case, the foster home placement is presumed to be for a limited period of time. The foster parents accept the temporary nature of their task and the child, too, is made to realize this home is not permanent.

Foster care is provided in various ways, ranging from informal private arrangements through which own parents find foster parents, to those involving court action and the state's permanent custody of the child.

TYPES OF FOSTER HOME CARE

At the present time, there are five possible types of homes for foster care use. There is the *free home*, where the foster parents are not paid for keeping the children. In this type, often the foster parents accept affection and complete responsibility for the child as compensation. This home is of limited usefulness today. Previously it was the main type employed, and the workers used the home in a humble and self-apologetic manner, weighted down by the need to be grateful.

② Another type of home is the *work home*. Here the children receive board and lodging in return for their services. This home is of very limited use today, suitable only for certain older children.

③ The *wage home* is the same as a work home except that wages are paid to the foster child in addition to his board and lodging.

④ The *adoptive home* is one where the children receive care free, with the understanding that if the placement is satisfactory, the child may be adopted.

⑤ The home most useful today is the *boarding home*, and this is the type

with which this chapter intends to deal. The foster parents receive remuneration for their care of the children in the form of board rates. This type of home is suitable for the majority of children requiring foster family care.

From a survey of changes in volume of foster care between 1933 and 1943 made by the Children's Bureau in 1945*, we draw the following significant indications: that there was a trend from institutional to foster family placement of children; that there was a marked increase in foster family care for children under public auspices; that under private auspices, there was a smaller decrease in foster family care for children than there was in institutional care; and that more extensive use is made of the boarding home than of the other types of homes.

These trends can be attributed to our recent philosophy and practice in regard to substitute care. The fact that foster home care has increased is a result of the concept that for most children a family life is preferable.

The increasingly prominent role played by public auspices is an indication of the greater responsibility assumed by the federal government. State agencies have been stimulated and assisted in providing better services for children and this has encouraged use of foster family care.

The increased use of the boarding home reflects concern for the real welfare of the child. It discards the principle of making children work for their living. It prefers payment to foster parents in monetary terms rather than at the expense of the emotions of the child.

SELECTION OF FOSTER HOME

In foster home care, the most vital need is to place the child in a home where he has some chance for happiness. This implies the exercise of great care in home-finding.

Let us define this term. Home-finding is a process by which prospective foster homes are first *found* and listed, then *evaluated*, and then *selected* for use by the social agency.

This is a grave task which carries great responsibility. Finding the right kind of foster home is basic to the success of foster family care.

Home-finding is not to be viewed as a high-powered process automatically turning out a specified number of homes in record time. It entails much more than just finding any home; it involves the use of the most

*"Changes in Volume of Foster Care, 1933-1943," *The Child, Social Statistics Supplement*. U. S. Children's Bureau. June 1945. No. 12.

skillful casework methods and should be undertaken only by well-trained, qualified workers. Too often, this important task has been put into the hands of new, inexperienced workers. Child-placing differs from other casework in the degree of responsibility that falls upon the worker. Without suitable homes and, following this, the correct matching of the child to the home, the value of foster family care may be lost.

Home-finding has gone through various stages. At first, a moralistic approach was used. The foster home was considered either good or bad and it was the job of the home-finder to measure the goodness and the badness. The worker would suddenly descend upon the unsuspecting foster parent, catching her off guard, in order to see if there were any signs of liquor in the house or dirt under the rugs, or if the yard was well kept. If the superficial evidence pointed to cleanliness, morality, and respectability, the home was considered good.

Along with this philosophy, went the belief that the home selected was always right and that if the foster child failed in the home it was not because of any demerits of the home but because of something within the child.

As home-finding developed, there came into use the "invaluable" outline. Every home was evaluated according to a strict, complete, minute outline. In this way, the worker felt she could know the home. But in reality the outline gave only a very static picture of superficial values and served to cover any doubt the worker might feel as to whether she really understood the forces operating within the home.

Since the advent of psychiatric influence in social casework, home-finding has benefited greatly through recognition of the importance of emotional forces in the home. The home-finder now realizes it is necessary to study the home in order to gain some insight into the motivations of the foster parents and into the intrafamilial relationships. Thus she finds that the determination of a proper home does not rest on a measuring of goodness or badness but depends on an understanding of what motivates certain behavior and how this will affect the foster child. The home is now looked at primarily in terms of its interactive potentialities. Thus home-finding has become a living, dynamic part of casework—a most essential part of a foster home program.

Even though today the physical attributes of the home are not the main consideration, still there is need to give this aspect of the home its due share of consideration. The child's physical needs must be met and the home study must determine whether or not in this respect the home can

meet minimum standards. Often the physical environment has important emotional value for the child and may act as a constructive or destructive catalyst on the emotional forces operating in the home.

WORKER'S ROLE IN EVALUATION OF FOSTER PARENTS

The motivations leading to the request for a child are many and varied. Some are unconscious, others conscious. They range from the desire to utilize vacant space to the complex need for narcissistic gratifications. Whatever these needs may be, it is not the task of the home-finder to label them either good or bad. Rather it is her job to understand the motivations and to determine whether they are so neurotic that the needs of foster children will be sacrificed to them.

It is the task of the worker to determine whether or not it will be possible to match the needs of the foster parents with the needs of certain foster children and in that way arrive at a suitable placement.

Not less in importance, and complexly tied in with the motivations of the foster parents in seeking a child are the familial relationships existing among the members of the foster family group—the basic emotional relationships of one individual in the family to another. The foster home worker cannot expect to find a home with absolutely no problems and no faults. However, it is generally accepted that the foster parents who are normally gratified in their own lives, especially in areas of love and achievement, will be the most satisfactory foster parents. Only harm can come from placing a child in a home where the family's emotional needs have an excessive and unreasonable quality.

It is essential that a child not be placed in a home as a means to some foster parent's end—for instance, to help the spoiled child in the home, or to bring the husband and wife closer together, or to fill the neurotic craving for a child just lost. This would only work to the detriment of the foster child who would only be a tool in the pattern of relationships within the family.

As has been said, there are negative aspects in every home. The important thing is to sense and understand them. If they are not too bad, they can often be handled and marshalled to use by the placement of a child who will fit into that particular setting.

Taking all these factors into mind—the motives of the foster parents in asking for a child, the interrelationships among the members of the foster family, and the physical standards of the foster home—the child-welfare worker must determine whether or not a home can offer to the foster child the tolerance, affection, flexibility and security that he needs.

QUALIFICATIONS OF FOSTER PARENTS

The outstanding contribution of a good foster home is that it satisfies the child's needs for security and recognition; and to provide these things the foster parents must have certain qualifications.

It is important that the foster parents have a settled philosophy of life. They should have sound moral and ethical standards, and appreciation of spiritual values. Foster parents must be sensitive and understanding enough to adapt themselves to meeting the child's needs according to the effect of his emotional deprivations on his own personality.

The foster parents must be able to treat the child on his own level. They should compare his achievements with his own previous record, rather than with a group level, and give him praise where it is deserved. Every child who must leave his own home and live away from his own family suffers a profound social and emotional disturbance never altogether compensated. The fact that he must be cared for away from his own parents carries implications that may affect his response to foster care; he may even have been "threatened" with foster home placement. If a child could talk out his problems it would be easier; but children are inarticulate, so they express their difficulties by their behavior.

It is essential that the foster parents be willing to work with the agency and able to accept and use the agency's assistance in dealing with behavior and personality deviations outside their previous experience.

Perhaps one of the most difficult things for foster parents to do is maintain pleasant, constructive relations with a child's own parents in cases where the latter may visit the children in the foster home. This is another instance in which there must be close co-operation with the agency. It often requires great tact and resourcefulness, when children are being cared for in a foster home, to keep the own parents from being resentful and jealous of the foster parents and fearful that their children are being won away from them. Yet for the children's sake, especially if it is planned that they may eventually be returned to their own homes, such reactions by parents must be avoided, and the children should be encouraged to keep up contacts with their own families.

The child should never be told that he will be sent away from the foster home if he doesn't behave. He should at all times be assured that the foster parents want him in their home and that they consider him a part of it, important for his own sake.

The child should not be permitted to shirk his reasonable responsibilities; and if he undertakes an obligation within his power to meet, he

should be expected to fulfill it. The foster parents should be interested in his activities and progress and should be ready with help and support where needed. The child should be encouraged to develop any natural talents and abilities he may have.

The foster family will naturally have a place in the social and recreational life of the community and the child is entitled to his place in these activities, according to his age, as a full member of the family. There should be plenty of opportunity and facilities for recreation and companionship. Except in the case of work homes, where a work pattern is prescribed, children should not be required to do work other than simple home duties which do not interfere with school, health, and necessary recreation. A child required to do certain tasks in the home, suitable to his own capacities, tends to develop his feeling of security and importance, since the tasks assure him of a responsible place in the scheme of things and afford an opportunity for accomplishment. Children in work homes may be employed only as permitted under the school and labor codes.

All children must attend school as provided for under state law and they should be encouraged to obtain the maximum amount of education possible in keeping with their ability and in view of possible future occupations. Arrangements for vocational or special training may be worked out with the agency. Most agencies have some provision for a personal allowance for the children. This gives the child an opportunity to develop initiative in how to spend money and a personal satisfaction of independence.

PROCEDURE IN FOSTER HOME PLACING

An office visit by prospective foster parents has a value that is generally accepted, and is being used more and more. First of all, it is thought useful to place some responsibility on the applicants. Their visit to the office is often indicative of their interest and purposefulness and it immediately gives them an active part in the enterprise.

This first interview with the applicant is the start of the casework process which eventually results in acceptance or rejection of the home. The majority of first interviews will yield sufficient information to determine whether further study should follow. However, having a rejection on the first interview alone is not wise, for it places too much responsibility on the skill of the worker.

The office interview includes the presentation of the application blank which the applicant may sign at this time or at some later date. In home

finding today, it is believed wise for the worker to use the application blank freely as a springboard from which to interpret to the applicant just what is involved in being a foster parent.

This is a main function of the office interview—putting the experience of foster parenthood on a reality basis for the applicants. The worker helps the prospective foster parents to see what is involved in this process and what their responsibility will be to the child, to the agency, and to the child's parents. She also attempts to help them see the part played by the agency and the child in the total placement process.

The worker must see the applicants as they are and not as the agency would like them to be. Instead of looking for an ideal, the worker must see the actual persons plus their potentialities and capabilities—their willingness and capacity to change and learn with new experiences, their tolerance and basic understanding of children.

The child-welfare worker doing home finding is limited by three important considerations. One is that the prospective foster parent comes to the agency not as a client seeking help, but as a giver of help who is offering the agency needed assistance. Another is the time element with which the worker must deal. She cannot, as is usually true in other uses of casework skills, take a long time to understand her client. She must achieve her objectives within one or two office interviews and a few home visits. Thirdly, the worker is faced by a person who most likely is looking upon this experience as either an acceptance or rejection. A rejection of the home is invariably thought by the applicant to be a rejection of the person herself. Thus, for the applicant the period preceding decision by the agency will be marked by fear and anxiety.

These considerations all play an important part in the casework skills utilized by the home finder. She must be able to accept the foster parents' offer of help and, without losing their co-operation, explain the need for an adequate investigation. Within a limited period of time, she must gain an understanding of the home sufficient to arrive at a conclusion in regard to its use. If she must reject the home, she must do it in such a way that she does not reject the foster home applicants themselves.

The office interview furnishes a means of observing the applicants, which is an important aid in understanding them. It is not only the things the applicants say that are important, but when and how they say them. Are they tense and nervous, or natural and relaxed? Do they tenaciously cling to an ideal foster child as one of a certain sex and age and are they unwilling or unable to change? Do they set up very rigid demands which make their real desire for foster parenthood questionable? How do they

speak of their own family—are they independent beings or merely images of their parents? Do they show resistance when discussing any part of the plan? How do they appear to accept the limitations that the agency would impose upon them?

It is hoped that in this interview it will be possible for the worker and the applicants to decide together whether or not they wish to continue with the application. Each should feel free to discontinue or continue and each should feel that he had his just share in the decision.

During the office interview, it is customary to explain to the applicants that it will be necessary to make home visits and to obtain their co-operation in this procedure. This is not as easy as it sounds for the applicant may have a hard time accepting the fact of investigation.

The home visit is a continuation of the casework process already begun and it serves further to clarify the worker's understanding of the prospective foster parents. It is a means of seeing the home as it is and also of observing how the occupants behave within its setting.

Careful observation is needed to gain insight into the emotional forces operating within the home. Much can be learned from the emotional tones and movements displayed by the family members. In seeing the family together, the worker can get some feeling of the relationships. It may be possible to observe who plays the dominant role in the family, and how, and the way it is accepted; the kind of participation displayed by the children, if any, in the family life; how various members of the family, and the servants if there are any, feel about having a foster child come into the home. All these considerations must be taken into account by the worker in her attempt to understand the family. Thus the home visits become an invaluable part of the home-finding process.

The worker needs to know something about the early experiences and background of the prospective foster parents. But these factors in themselves are not as meaningful as is an understanding of the way the foster parents felt about these things and how they dealt with them.

The use of outside references in learning about the foster family was formerly an unquestionable practice. Today there is no set policy; agencies use them in varying degrees, or not at all. The trend is away from reliance on this type of information, especially when the worker has gained security in her professional skills and experience.

Most references can at best give a picture of the family's standing and acceptance in the community. It has been found that references generally tend to praise, following the philosophy that people who would open their home to a child must be good and kind and worth while. An outside

reference still used to a great extent is that of the family physician. However, it is used as mainly a medical reference rather than a social one. Agencies also use the schools to some extent to verify the adjustment of the children in the prospective foster family.

Throughout the home-finding process, the worker constantly weighs and evaluates and finally she is in the position of denying or gratifying the important wish of someone who has offered something to her. It is in this decision that she feels the culmination of her responsibility.

There may be many reasons for rejection of a foster home. It may be that the home is not within the placing area of the agency or that it is not located in a satisfactory neighborhood offering the minimum advantages to the child, such as adequate medical care, schooling, recreational facilities. Perhaps the prospective foster parents are not in good enough physical health to care for foster children.

Perhaps the rejections are based on the motivation of the foster parents and on familial relationships. The home would be rejected if the need of the applicants to have a child were so neurotic as to be detrimental to any child placed there. A rejection could be made if one or both of the applicants were deemed unable to accept the responsibility of another child without destructive disruption in their present family life.

A home would be questioned if it were offered for use merely to obtain financial remuneration when the parents were insecure and had no real interest in children. The home would be questioned if a child was desired merely as a tool to achieve a change in the family's own child or in their marital relationship. Workers may find it difficult to reject a home if they have identified it with their own home and so seem to be rejecting their home.

It can be seen that there are no cut-and-dried answers to a question of rejection. The worker has an unevadable responsibility here which requires a great deal of insight and understanding.

Applicants should be told why they cannot take children for foster care. They have a right to know. It is very important, of course, to handle the rejection so as not to leave lasting unpleasant effects upon the applicant or upon the community.

There are various methods of refusal and the one used depends on the individual situation. The desired objective is for both the applicant and the worker to make the rejection a joint result. However, this is more easily said than done.

One method that is generally recognized to be bad practice is making

the reason for the rejection vague and evasive. This only serves to increase the applicant's anxiety and hostility. She does not know just why she was refused and she may not be sure whether she was refused permanently; therefore she is continually hoping and trying.

Also, prolonging an investigation after a decision of refusal has been reached is very unwise unless it is necessary to do so in order to obtain some reason for refusal that will not be destructive to the applicant. The prolongation only serves to increase the applicant's frustration and makes the refusal more difficult to accept. Generally speaking, the applicant should be informed of the decision as soon as possible.

After the approval of the home, the home-finder is through unless her duties also call for her to supervise the child in the home. If she does this, she can go on with diagnosis and evaluation.

CENTRALIZATION AND DECENTRALIZATION

Whether or not she finds the home and also supervises the child within the home or whether she is through upon approval depends on the organization of the home-finding process within the agency. There are two main types of organization—a centralized home-finding plan, and a decentralized system.

The centralized plan operates usually in the following manner. The agency has a special department in which the workers do nothing except home-finding. In this department, in addition to the home-finders, there are usually one or two staff members who work in liaison with those in the agency who are in need of homes in which to place children.

Under the centralized system, the worker is not under the urgent pressure of finding a home immediately for a certain child so she can spend adequate time in studying the home.

In situations where the home has been in use for some time, the worker supervising the home may become dissatisfied with it. A home-finder in the centralized system can go into that home and evaluate it objectively, considering the worker's experience with the home; thus the home may be preserved for use with other children for whom it might be desirable.

It is very important for effective working of the centralized home-finding process for the worker who is supervising the child in the home to evaluate this home critically from time to time. Only in this way can the department be aware of the continuing suitability of the home. The home-finder merely begins the process of examining and evaluating.

The home-finder under the centralized system carries out the entire home-finding process and withdraws after approval or rejection of the

home. If a home, after a period of use, needs a re-evaluation, the home-finder again enters the picture.

The centralized system is used in an agency where case loads are high and where there is a need for the full-time services of home-finders. In small agencies, it is not a necessary or practical plan since case loads are not high and each worker has time for home-finding.

The centralized system has been criticized on the ground that there is a lack of understanding and co-operation between the home-finding and the supervisory departments. The home-finder, it is said, tends to identify so much with the foster parents that she loses a feel for the child, whereas the children's worker tends to identify with the child to such an extent that she often does not understand the foster parents and hence demands a home with little realization of the difficulties and factors involved in its selection.

An advantage claimed for the centralized plan is that the home-finder has more time to devote to the home-finding process and therefore can investigate more homes and do a more intensive job with each. In studying the home, the worker can look at it objectively in terms of its value as a foster home for general use.

The decentralized system is used in an agency where there is not a special home-finding department but where everyone, at least in the foster home department, does home-finding. One advantage mentioned in regard to this system is that one worker contacts the home and continues with it all the way through. In this way, it is possible to build up a good relationship throughout placement.

Another asset mentioned is that the home-finding process in this way is more informal. Further there is a clarification of the agency's purpose as a child-placing agency with the main purpose of serving the children; in this purpose the foster parents are important only as they serve the needs of the child.

NEED FOR FOSTER HOMES

With the development of urbanization and higher standards in the foster home placement field, there has been a corresponding lack of foster homes. This deficiency was emphasized during the war years. At that time many homes were broken up by the draft; mothers needed to work for financial reasons and many felt a patriotic duty to do so. This necessitated placement of their children. Day care provided for many, but there were still a great many needing regular full-time foster family care.

While the need for child-placing facilities increased, there was a decrease in the number of homes available. Many foster families were broken up by the war and could not continue their foster home activities; many foster mothers found outside jobs which enabled them to make more money than they could as foster mothers, in addition to giving them status as performing a patriotic duty. There was too little emphasis during the war years on foster parenthood as a patriotic occupation.

In addition to the loss of old homes, there was, of course, great difficulty in finding new ones. During this time also there was a lack of skilled child-welfare workers, which complicated the placement problem.

The housing shortage was an important factor adding to the increase in children needing placement and to insufficiency of homes.

There is no doubt that the lack of homes has resulted in the selection of many which would not have been used if homes were plentiful. In weighing the positive and negative factors, the worker has tended to accept the home if the positive slightly outweighed the negative. Many foster homes have been crammed with more children than they should have and this has had detrimental effects on both the foster parents and the children.

One beneficial aspect resulting from this acute home shortage has been a re-evaluation of standards carried out by many child-placing agencies. These agencies faced the fact that they would not be able to find nearly the number of homes they needed if they kept their pre-war standards. It was almost impossible not to lower them. The important thing was to do the lowering with the least harm to the child. Thus many agencies in the field recognized a need for an evaluation of their current standards to see what could be eliminated without resultant damage to the foster child.

It was seen that there was a need for a more realistic basis for the selection of foster homes from parents previously lumped together in categories—such as those labeled “too old,” “widowed,” “too young,” “no experience with children.”

In re-evaluating standards, we need to recognize what is essential to the needs of the child and what can be dispensed with in most cases. Many physical standards can be modified, when necessary, so long as the child receives the basic love and affection and opportunity for emotional growth that he requires.

It has become increasingly recognized and appreciated that the board rate paid the foster parent may well have an important effect on the number of suitable foster home applications. During the growth of social work, there was always an undertone of the lady hountiful who should

not be paid for her services. This feeling is still reflected today in the salaries of social workers. Foster parenthood also has had such a heavy veil of altruism attached to it that foster parents have been considered good people who did not need to be paid.

As Howard Hopkirk says, "Our pious avowals of regard for mothers and motherhood, often registered in resolutions, have been for the purpose of satisfying communal conscience more than for assuring a sound economic basis for the care of other people's children."*

FEES FOR FOSTER PARENTS

There is an increasing awareness today of the importance of paying the foster parents adequately for the job they perform. Social agencies and children demand a great deal from foster parents. We depend on their services for a type of placement deemed desirable for most children. Certainly they should be paid according to the valuable service they perform.

Adequate remuneration for the job of foster parenthood would contribute to a feeling of responsibility and pride on the part of foster parents in the work they are doing. There would be an incentive to be a foster parent and incentive to do a competent job.

Working on this assumption, the Connecticut Children's Aid Society raised its board rates for babies from \$6.00 per week to \$10.00 per week.† It secured twenty-two more homes than in the previous year. There was also an improvement in the quality of the applications and the homes obtained.

The need is to provide board rates high enough to attract families of average income who would be interested in becoming foster parents and who would take an interest in the child, but not so high that the rates would attract persons for financial reasons alone. Board rates vary throughout the country, ranging from \$18.00 to \$50.00 monthly. There was some upward swing during the war but not enough.

RECRUITING FOSTER HOMES

In order to secure an adequate number of foster homes, applications must continually be stimulated. In general, present foster parents have been the best recruiters of new foster homes in terms of quality and the

*Hopkirk, Howard W., Executive Director, Child Welfare League of America, 130 E. 22nd Street, New York, N. Y. "What Price Foster Care." *Child Welfare League of America Bulletin*. May 1943. p. 4.

†Zane, Rollin C., "Board Rates for Babies." *Child Welfare League of America Bulletin*. Jan. 1945.

number accepted. This recruitment source increases in proportion to the satisfaction of the foster parent. If foster parents are dissatisfied with the agency and their job, they do not make very good publicity agents.

A number of foster home applications are secured through ads in the newspapers. However, the percentage acceptable out of the number that applies in answer to an advertisement is very meager, and the elimination of the unsuitable homes is very time-consuming. Also, the many homes refused must be handled carefully so as not to incur their ill-will which could be harmful to the agency in the community. People have a hard time understanding why their homes are refused when the agency still asks for more. The trouble with an ad in the newspaper is that it gives too little chance for interpretation of requirements and standards.

Often better results are obtained through direct personal contact with various clubs and groups throughout the community. This, in the form of formal addresses, plus general contacts, provides a fair source of homes. Radio also serves a purpose as a publicity medium and more use should be made of it.

What this task of seeking sufficient homes really amounts to is one of skillful community organization. We need to reach the general public to let it know what the needs are and how we attempt to meet these needs. The job is one requiring more than casework skills alone; it calls for good community organization techniques and the use of downright plain publicity. Here is where social agencies could make good use of publicity experts, a type of service they have made too little use of in the past.

Along with publicity can go a skillful interpretation of just what foster parenthood means and requires. Not only must the needs of the child be presented, but foster parenthood must receive the respect and distinction it deserves.

FOSTER HOME LICENSING

The laws of practically all states now provide for licensing of boarding homes or boarding houses caring for children, and in many states the licensing of any family home receiving children for care and accepting compensation for this care is authorized.

It is usual for the states to allow the placement of a child in the home of relatives without requiring inspection or licensing. Such a plan is unwise. The biological fact of relationship does not mean that the home will be suited to the child.

There is wide variation between states in the character of legislation and in the method of delegating authority to licensing agencies.

The state department of welfare should be charged with the legal responsibility for licensing foster homes and child-placing agencies, of determining the standards under which they must operate, and of seeing that these standards are maintained. It should be empowered to delegate to authorized child-placing agencies authority for investigating foster homes used by this agency and recommending them for licenses. It should delegate to the county welfare unit the investigation and licensing of homes used by parents as direct or so-called "independent" placement of their children. If there is a question concerning the sanitary condition of the home, the local health department may be asked to cooperate by making an inspection.

The state department, if it is to maintain satisfactory standards, must furnish an adequate service of supervision and consultation to child-placing agencies and to its accredited licensing agency.

Logically, any agency qualified to become an authorized child-placing agency should also be empowered to recommend, for licensing, the foster homes it uses. Delegation of the licensing function to another agency is only duplication of effort and acts as a countercheck on the work of the placing agency. In effect it is an illogical qualification of a trust. Can we say an agency is trustworthy in the complicated process of placing a child but say it is not worthy of trust in recommending a license for the homes it uses?

It is common practice that licenses be issued for one year at one location with the proviso that the license may be revoked for cause prior to expiration. Such revocation may be initiated for various reasons which lie within the general area of non-conformance to standards. Many states provide specifically that the license may be revoked if any boarders are taken into the home without prior approval of the placing agency. They also require reinspection of the home at the time the license is renewed, since home conditions may have changed radically in the one-year period.

Since licensing is inextricably bound up with standards, it appears that uniformity of standards must come before uniformity of licensing practices. Today there are wide differences in the standards set up by the various states which the home, the foster family and the child must meet in order to qualify for participation in the placement process. In general, state standards tend to emphasize environmental factors more than emotional, cultural or spiritual aspects.

The Child Welfare League* and the U. S. Children's Bureau have both published carefully constructed sets of desirable standards. It is generally recognized that standards for foster care in a given community must be modified to meet the standards of care for all children in the community.

The most vital factor in the selection of satisfactory foster homes is the skill of the worker in evaluating the assets of the home. Perhaps the elaborate standards devised by some states were thought to be necessary because of the inexperienced workers doing placement. When skilled workers with sound casework training are engaged in child placing, the ideal in establishing standards would appear to be to delineate desirable features without fixing rigid boundaries within which the foster home must be compressed.

INDEPENDENT PLACEMENTS IN FOSTER HOMES

There are always parents who wish to place their children independently. The home they use may have been chosen by them or suggested to them by a relative or friend. It is probably unlicensed and unknown to any agency. It may have been accepted because of the pressure of circumstances, the main concern of the parent being to find a place where the child could be left rather than to insure the type of care the child needed. The conditions and relationships within this independent home are unknown to the parents; sometimes there is exploitation of the child. In some cases, exorbitant fees are charged.

The parent may not know of the requirement that children must be placed in licensed homes, or she may wish to avoid supervision and be antagonistic to any suggestion of services which she would consider interference with parental rights.

The problems of the unlicensed independent home might be lessened by interpreting to the community the difficulties inherent in placing children there and spreading the knowledge that a list of licensed homes was available at a local private or public child-placing agency.

In the case of the independent home, the county welfare department should be the unit of supervision because it is nearer the home than the state administration. The state would issue the license upon recommendation by the county and would act in a consultative capacity.

When the independent home has been brought under control and regu-

*"Standards for Children's Organizations Providing Foster Care." *Child Welfare League of America Pamphlet*. Mar. 1941.

lated by means of a license, there still remains the problem of stimulating it with better standards of care.

Many of the evils of the independent home can be eliminated by a system of licensing, although probably there will always be independent homes that will manage to operate without licenses. Some states do locate and license independent homes and have set up special divisions to handle investigations.

PREPARATION FOR PLACEMENT IN FOSTER HOME

Where does the preparation for placement begin? Some caseworkers contend that a child cannot really be prepared for placement; the separation from his parents must be experienced. No child can face separation without trepidation and anxiety. But the separation may carry with it less agony if the children concerned have the help of a child-welfare worker to face some of their feelings toward their own home before they are removed.

We know that physical removal of a child from a home does not remove the impress of the emotional experiences he had in that home, although in mild situations new opportunities and stimuli may prove entirely favorable to his development. The child about to be placed has already experienced faulty relationships in his own home. He has met rejection if only in the form of having his parents separate themselves from him by death. The mores of our culture make us want to belong to someone and condition us to regard as desirable certain attachments and loyalties; this leads the child to think that going away provides certain proof of his unpopularity with his parents, or that it will be testimony to his inner fear that his parents haven't measured up. The extent of the trauma and the damage done will be in relation to many factors—the personality of the child, which finds much or less pain in living; the kind of people with whom he has lived; the extent of his deprivation by them, and the number of his unassimilated and unsolved problems.

The needs of a child in a foster home are basically the same as the needs of other children. Only they are intensified and distorted and harder to meet because of the child's past experiences and the limitations of his present environment.

The first meeting with the child should be carefully planned; first impressions are important. The situation should be developed to relieve the child as far as possible of feelings of shyness, awkwardness and constraint. Any arrangement that will break the ice is worth trying, for the placing visitor will be closely integrated with every phase of the child's

life from the first meeting until his return home and afterwards, exerting an influence that is far-reaching.

Children, even when very young, are particularly sensitive to genuineness in the people with whom they are thrown. They detect at once a condescending attitude. Their defense is to assume a pose of attention, when in reality their thoughts are traveling in more interesting fields. A straight-forward, friendly approach is more likely to reach a child. The visitor should be direct and scrupulously truthful and make sure that others are so in their dealings with the child. She must be quick to receive impressions and confidences.

Annette Garrett in *"Interviewing, Its Principles and Methods"** tells of an instance where the worker had only a short time to prepare a little girl for placement. The child was in the detention home and her experiences had been particularly terrifying. The worker as she was about to leave after her second visit noticed a questioning look in the child's eyes; quickly and correctly interpreting what the look meant, she knelt down. The child put her arms around the worker's neck and gave her a kiss; then she let out a nervous little giggle. But she had given no other expression to this desire of hers other than the look the worker responded to so well.

Explanations Due Child: The worker knows so definitely what she intends to do, or is carried along so swiftly by the flow of circumstances, that she may forget to explain the situation to the child, step by step, a procedure necessary if he is to acquiesce in the plan. Before making any move with a child, it is best to be certain that he has some idea of it and of the plan in which he is to play the principal part so that he does not think, and will not later think, that the facts have been misrepresented to him.

In the rush of a day's work, there is a temptation to hurry a child through an interview, a medical or psychological examination, to give little or no heed to his natural confusion and fears at the time, or to make a new arrangement for him and give him only a scant or unsatisfactory reason for it.

Often through pressure of work and in her desire to expedite the placing, the visitor may forget entirely to consider what may be going on in the child's mind. Nothing is so important from beginning to end as the child's point of view. More than likely he is dazed and puzzled by being taken from place to place, examined by physicians and introduced to strange people. (A new outfit of clothing may form the only bright spot

*Family Welfare Association of America. New York, N. Y. 1942.

in the day.) Picturing to him the home to which he is going and the people among whom he is to live will help, just as a description of the child helps the foster family. He should know whether he is to be in the city or in the country, and what he may expect to find in the way of good companions and good times. The experience will nearly always be entirely new to him and may be made by the worker to appear interesting—an adventure, in fact—instead of something to be dreaded. The visitor must ask for his co-operation. He must feel that he has a part in the making of plans. Whether the placement will be successful is determined by whether the child can actually accept placement.

Throughout the placing, the child's attitude toward his own parents will demand consideration. It is deep seated, going back to memories of early childhood. There are children who retain a staunch loyalty to parents in spite of neglect. While clearly remembering ill treatment or parental behavior that has led to disruption of the home, they will defend parents fiercely, making excuses for them and fixing the blame upon others.

The reverse may be felt by another child. He wonders why his parents let this happen to him and so denied him a basis of equality with other children. He gets a feeling of deep resentment toward them; he is ashamed of his parents, and of himself because he is ashamed of them. Older children who leave their homes, with direct knowledge that the change in their lives has been caused by the unacceptable behavior of their parents suffer acute feelings of inferiority. It is only when the worker and the foster family understand this sensitivity and respect it, that they can help him make any headway in reaching a wholesome adjustment to his problem and thereby decrease for him an emotional strain which, if unrelieved, may become unendurable with passing years.

Adults often think emotional adjustment can best be assisted by keeping the attention of a child focused on his present environment and helping him to forget as rapidly as possible everything that has gone before. This is not a difficult thing for children to do, and if it seems to be what is expected, they lend themselves willingly to the forgetting program. But humans achieve stability and emotional comfort by virtue of a definite thread of continuity of experience and memory. So a conscious effort on the part of the foster parents to help a child forget all that has preceded his arrival at their home is one of the most certain causes of emotional strain and confusion.

One of the most difficult things about placement is its total quality. It is more total, more final in feeling than almost any change children ordi-

narily experience. Any change in the average family is experienced by both parents and child and takes place within a unity that stays put; the mere physical stability provides partial insulation against fear. A normally satisfied child in his own home looks forward to adventure and change. A foster child is more apt to dread and resent it, until he is made to feel that change may bring him a happy experience.

CHILD-WELFARE WORKER IS SYMBOL OF SECURITY

The worker is the one constant factor in what may be a situation that is constantly changing. She must be the anchorage to give the child some security. When everyone else seems to have failed him she will be a friend to help him out of his troubles. She must overcome any personal prejudices to prevent their hampering her work. The worker's more or less unconscious attitudes toward parents and children as they stem from her own life experiences are a subtle but important personal factor and play a crucial role in working with children. Child-placing affords fertile ground for overidentification with parents and children and can be a serious block to good child-welfare work. Knowing one's own tendencies is a safeguard. After all, taking a child out of a home has a peculiar wrenching quality not only to parent and child but to the worker. There is always some discomfort in child-placing. The thing the worker does to help brings some pain. This is inherent in the service.

Always the feelings of the child should be considered, and for this reason it is thought unwise to allow him to be seen by the foster parents before he goes to their home. A request for this sounds reasonable but it can be made plain to the prospective foster parents that the experience of being inspected would be extremely painful for him, especially if they reject him, and a long chain of difficulties might ensue. There is the added danger of giving the child the sense of being a pawn in the care of the organization. He is only too ready anyway to believe that no one cares particularly for him and that he is different from other children.

The actual introduction of the child to the foster parent varies in each case; on the whole, however, it is advisable for the worker to leave as soon as the situation allows, since two people make a warmer and freer contact when unobserved. As the worker is not a member of the household, the foster mother and child should begin mutual understanding as soon as possible.

A worker should never allow a child to get the impression that she is in a hurry. The child may know there are other children under her care but he must feel he is as important as any of them. If an emergency

arises which would prevent the worker from accompanying the child to his new home, it is better to postpone the placement than to bring an outsider (a substitute worker) into the situation.

If there is a wide divergence of standards between the natural home of the child and his foster home, the adjustment will be smoothed if the worker counsels the foster parents not to expect to make him over too quickly; she should give a circumstantial account of the conditions in his natural home. As pointed out before, a source of emotional strain lies in the adjustment the child must make to the different standards. Bewilderment and confusion can follow a sudden change, especially if he feels that conformance is necessary to get food and shelter. Children can lend themselves to forgetting if that is what is expected of them.

CHANGE OF FOSTER HOMES

When we consider preparing to move a child from one foster home to another, we have to know the reason for the change first. It may be necessary because of some change in the foster family itself which makes it impossible for the family to continue co-operative and adequate care. Or it may be due to faulty preparation for placement in the first place. Or the child may have outgrown the home; he may need a different school or community, more recreational facilities. It may be that the child's own family lives so near that there is a constant deleterious interference. Or perhaps the foster home is too far distant from the agency for adequate supervision. Or there may be a change of plan, with adoption decided upon or a free or wage home desired.

There is little difference between handling a placement and replacement except that preparation for the latter is a longer and more difficult process. The worker should evaluate the real situation in the foster home in the light of the child's present and past experiences and try to decide if replacement is necessary. If so, she must work as if he were in his own home and give him insight into the reasons for the replacement. The new foster mother must be prepared in the same way as was the first foster mother.

Replacements can be made with more knowledge of the child's capacities and characteristics than is possible in the first placement and that fact often makes replacements more successful. When the agency has had a chance to observe the child in one home, it can judge better how he will behave in another type of home, whether he will adapt himself to family life and what sort of foster mother and father he most needs.

There is an important disadvantage that offsets this, however. The

child's own attitude will not be propitious. If he has been happy in the first foster home he will not wish to be moved. If he has had an unhappy experience in one home, he will dread going to another. If he had to leave the first home through some fault of his own he is likely to be either self-distrustful because of his failure or defiant and careless of the effect he makes. Neither of these moods promises well for his behavior in the next adjustment he will have to make. A child who has proved too much for his first foster parents is likely to go to a second home with a determination to get the better of the parents there as well.

To deal with these attitudes, the child's own feelings and preferences should be consulted as far as is practicable.

Avoid interrupting the school year or half year. Causes for replacement are often more chronic than acute so it is better to postpone it until promotion.

The use of a temporary study home often helps to break up separation of a child from his own home into small steps and, in addition, ties in with the child's own impulse to growth. The initial period in the temporary home provides a trying out, with the caseworker's help, of many aspects of the new way of living. The worker will stand by if the child reacts with struggle, pain, fear and temper or misbehavior in the day-to-day experiences of study home, clinic, and agency procedures.

A temporary home may help a child to move to a new, more permanent situation. Some children reach out directly and with little confusion for what they need. They are resilient, not too damaged by painful experience, and ready, if given a little time and opportunity, to find in a new situation what is helpful to them. The problem of placement rests ultimately with the child, but the caseworker must provide the means to it.

The temporary study home placement may also help the parent with the difficult decision necessary in placing the child. The parent often wants and does not want to place the child and must battle his guilt and fears in so doing. When the parent comes to the agency to ask for placement, something has already happened to the family solidarity. There is a beginning of emotional separation and the parent has given up a certain amount of responsibility. Placement carries real meaning and is purposive for parents. It enables them to carry out certain plans. These plans may have developed because of pressures of illnesses, job difficulties or unpleasant family or marital conditions. Whatever the causes, the background and total life experiences of the applicant are different, and so the meaning of placement is different for each applicant.

Unless the worker is sensitive to the underlying purpose, not the overt expression alone, she misses the real points on which her future work with the case should be based. The worker must try to help the applicant decide whether placement of the child is the realistic answer to the parent's problem. If the client decides that placement is not what she wants, it is the duty of the worker to refer the client to the place where she can get the kind of service she needs. If placement is desirable, can the worker's own agency supply the service and the foster home best suited to the child involved? Would institutional placement be more satisfactory in this case?

The worker carries a three-way relationship—with the parent, the child, and the foster home. This relationship varies according to the needs of the three other participants. The child is an unwilling participant. It is often a function of the worker to assure the parent that she does retain legal responsibility for her child; the agency simply takes over the responsibility for the care of the child.

Effort, time, and expense can be saved for client and agency by a thoughtful and painstaking intake service. This protects the child-placing function of the agency; it helps prevent hopeless placements; it helps parent and agency determine 1. whether placement is desirable, 2. what type of placement seems advisable and 3. where this service can be most satisfactorily obtained.

PLACEMENT OF THE CHILD WITH BEHAVIOR PROBLEMS

Children legally defined as delinquent are usually children who have lacked security and a stable home situation. The deprivation may have been economic or emotional. Whatever the cause, the child has felt rejected, insecure or inferior and in his frustration has struck out against authority. This has identified him with destructive influences and eventually brought him into conflict with the law.

Formerly a child like this was considered an institutional problem but with greater understanding of the underlying causes of behavior, we began to see that what he needed was a normal home life where he could feel a sense of personal security and adequacy and where he could have opportunities for physical care, recreation and education. Foster home care was found to be most useful in helping him to overcome conflicts and disturbances so that he was no longer a "problem."

The child-welfare worker has to select with special care foster parents who will have patience, who will be able to accept the child as he is, and who will share the concepts of behavior and the theories of treatment

held by the agency. Foster parents may find that a child is unable to accept or give love because he is unable to face painful realities of his own life. They may find that change in a child's behavior may come slowly—there may be frequent regression to unacceptable behavior. Foster parents must understand these things and be willing to bear disappointments and still persist in the effort to help a child move toward a goal of success.

Casework service with the foster parents after approval of the home is a subject for much consideration. Many agencies regard their foster parents as part of the professional staff and treat them accordingly. There is some indication, however, of a trend toward considering foster parents as clients with certain needs who should be helped, if possible, with casework so as to achieve satisfying relationships and thus become better foster parents.

Agencies have sponsored group meetings of foster parents to supplement the agency program of individual supervision.

The group meetings have augmented the foster mother's understanding of the child and his problems as well as the role of the foster parent in the child's development. One method of carrying out this objective has been formal courses under the auspices of universities; another has been informal talks followed by a discussion period. In both of these programs, emphasis was on the prevailing ideas regarding child care and development and on the specific problems of children in foster homes.

These foster parent meetings for group education have also had good collateral effects. They have helped the agency to find more foster homes, to improve agency policies through comparing of ideas by workers and foster parents, and to make known the needs of children in the community.

PHYSICALLY HANDICAPPED CHILD

Foster home care of the physically handicapped child, especially the child with rheumatic fever or orthopedic conditions, has been demonstrated as one satisfactory resource in treatment. It has also been used effectively in post-operative conditions and in cases of anemia, asthma, malnutrition, and other illnesses where there is a favorable prognosis and children need nursing care but not intensive medical oversight.

Care is imperative in the selection of foster homes for these children. They must not only meet standards for physical care, such as conveniences, space, heating facilities, ventilation, and fire prevention, but also be able to keep up the morale of the ill child.

The foster mother must be free to devote whatever time is necessary to the child. She must understand the importance of keeping accurate medical records and be willing to accept and intelligently carry out instructions. She must be patient and understanding in regard to the vagaries of behavior a child develops because of illness.

The children's worker is responsible for securing a suitable home for children who have been selected and referred by the hospital medical social worker for foster home care. The children's worker does the actual placement, describes to the child's own parents the foster home and the care the child will receive there, and in co-operation with the medical social worker works with the child toward his acceptance of foster home care. By working with the child prior to his actual placement, the children's worker makes herself known to the child and forms a needed link for him between known and unknown experience. She continues her supervision of the foster home and her relationship with the child's own parents pending his eventual return. The interpretation of the nature of the child's disease and the type of medical care are the responsibility of the medical social worker if this service is available.

The foster home must guard against overemphasis on physical care to the point of producing attitudes of self-interest which may become neurotic.

When the child returns home, the follow-up may be done by the children's worker or the medical social worker, depending on the individual situation.

MENTALLY DEFICIENT CHILD

The care of the mentally deficient in foster homes, now referred to as Family Care, was first introduced into Belgium approximately four hundred years ago.

In 1892, various institutions in France formed a co-operative arrangement for experimenting in foster home care. Choosing the small city of Dun, they sent to family homes there both insane and mentally deficient persons. Boarding these patients in private homes seemed from every standpoint, emotional, physical and financial, to be successful.

As one consequence, foster home care began to be used as a treatment method in the United States. In this country, however, entire communities have not combined to board or house a group of mentally deficient, as in Dun, but foster homes scattered throughout the various states are caring for individuals.

In choosing a foster home, the selection of the proper foster parent is

of the greatest importance. It requires real skill to understand the simple functioning of the defective's mind. Great emphasis must be placed on the foster parent's understanding the limitations and vagaries of the mentally deficient and upon the securing of foster parents with unlimited patience.

Like all other people, the mentally defective child needs a home and emotional security. He suffers without close family ties. Frequently he is rejected by his family, and usually by the community, and so in choosing a foster home it is especially necessary to secure foster parents who are accepting of and interested in him.

The child-welfare worker will need to see the defective child and the foster parents frequently to give support and interpretation if the foster home placement is to be successful.

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17

DAY CARE

Definition: Day care is defined as "care given to children who for various reasons must be cared for during the daytime by others than their own parents." This type of care differs from that of other child-rearing institutions or boarding homes in that no *overnight care is given*. In other words, day care is designed to supplement care given at home and round out the twenty-four-hour day for the child.

DEVELOPMENT OF DAY CARE

Some sort of day care facilities have existed in many communities for a number of years; however, the expansion of day care programs was due to the large numbers of women added to the labor force during World War II. Prior to the war, day care facilities were mainly for children whose mothers worked because of economic necessity; whether this will be the case in the future remains to be seen.

There has been considerable controversy in regard to a program that aids a mother in handing over her job of mothering to day care facility. The first responsibility of women with young children is widely recognized to be that of giving suitable care to their children in their own homes, and although the Aid to Dependent Children program would enable many of them to reject outside employment and stay in their homes, the right to work must also be given consideration for those who do not wish to be dependent upon society or to live at a subsistence level.

Types of Day Care: Two general types of day care have been developed—individual and group. Each type has been established to serve different needs. Individual children may be accommodated by either foster family care or supervised home-maker service, while group care of children includes kindergartens, nursery schools, day nurseries, and extended school programs.

INDIVIDUAL PLACEMENT—FOSTER-FAMILY DAY CARE

The care of a child in a family home other than his own serves many needs which cannot be met by other types of care. It is considered the best care, outside his own home, for an infant under the age of two, for it has been found that group care of very young children is unsuitable from the standpoint of the child's health as well as his need for indi-

vidual attention. This type of care is also particularly useful for the child from two to six when the child's family lives far away from nursery schools or day care centers and when a good foster home near the child's own home eliminates long daily trips to such schools or centers. In addition, certain small children who, because of emotional, physical or mental disabilities are unable to adjust happily to group care find the individual care and home-like atmosphere of a good foster family day care most beneficial.

Foster family day care might also be used for large families where all of the children could be cared for together in one foster home, and it is especially suited to before and after-school care of school-age children. Its main drawbacks are that it is difficult to find suitable foster day care homes and that care in them is expensive.

INDIVIDUAL PLACEMENT—HOME-MAKER SERVICE

The other type of individual care, *supervised home-maker service*, makes it possible for a child to receive care in his own home, thus enabling him to remain in known surroundings and have a sense of security not always afforded by other forms of day care.

Home-maker service may be described as the placing of a carefully selected home-maker, actually a visiting foster mother, in the home to care for children during the temporary illness of the mother, or during the temporary illness of a child whose mother is working, or when the child or children of a working mother do not fit into the group care program.

Home-maker service is not domestic service. The home-maker is a mother-substitute who does the mother's accustomed tasks, such as giving care to a sick child, assisting the father to run the household on the accustomed budget, marketing, preparing meals, mending, and doing other general routine housework.

The development of competent home-makers is an important function of many social agencies, primarily family welfare agencies, although a number of other agencies providing foster care for children have made home-maker service available.* Home-maker service is generally financed by the social agency because families receiving such service are for the most part those in a marginal or low income group. However, payment is being made increasingly by families where they can afford to do so.

**Directory of Private Agencies Having Programs of Supervised Home-maker Service*. U. S. Children's Bureau. Jan. 1942.

The placement of supervised home-makers in family homes was started in 1923. This service developed slowly until shortly before World War II, when, owing to large-scale employment of women, the expansion of such service increased rapidly.

The term home-maker seems preferable to housekeeper because it emphasizes the broader scope of service, which includes the ability and skill needed in assuming responsibility for directing the activities and development of children. The qualifying word "supervised" distinguishes this service given under the supervision of an agency from the non-supervised work of a privately employed housekeeper.

The procedures used by agencies to determine fitness of a woman for home-maker service are, for the most part, similar to those used in selecting foster parents. Selection is made on the basis of physical condition, education, previous work experience, religion, interests, ability to work with people, flexibility, ease of adjustment in new situations, sensitivity to home attitudes and family situations, attitudes toward various types of behavior, and methods for meeting problems that may arise. Chronological age does not seem as important as maturity and flexibility.

The caseworker in the agency and the home-maker must work closely together if the home-maker service is to be effective. The caseworker, because of her professional background, should be able to give assistance to the home-maker in acceptance and understanding of the family, and the home-maker because of her close association with the family should be able to contribute to the caseworker's knowledge and perspective in the particular family situation.

Many agencies arrange for training courses for home-makers. These courses include discussion of material on behavior and habit training of children; planning, preparing and serving meals; home nursing; first aid, and household management. Personnel practices, wages paid and hours of work vary with local conditions.

Home-maker service appears to have a rightful place in a children's program and to warrant more extensive development. This will depend upon how successful agencies can be in recruiting suitable personnel and how much financial support they can get for their part in such a program. Even though home-maker service may seem to be only a small part of a child-welfare program, that small part deserves recognition and a chance to develop the worthwhile service it has to give the families of a community.

GROUP PLACEMENT

Of the different kinds of group care for children, probably the *nursery school* and *kindergarten* are now the best known, although the *day nursery* antedates them. Kindergartens accommodate children in the four-to-six year age group; and, since they are usually administered by local school districts, their programs are set up to emphasize educational needs and are adapted to the advancing maturity of the children. Before World War I, most kindergartens operated on a half-day basis. During the war, many of them adjusted their programs to provide full-day care for children of employed mothers.

The day nursery (also called day care center) and the nursery school, as they exist today, are two distinct institutions with different backgrounds and techniques. The origin of the day nursery can be traced to women's participation in industry outside the home.

The United States opened its first day nursery in New York City in 1854. By 1897 there were one hundred seventy-five organized day nurseries in this country. The National Federation of Day Nurseries was organized in 1898.

Day nurseries in this country usually operate independently of schools and are concerned with offering a "harmonious environment in which a schedule of daily activities provides the child physical safety, healthy enjoyment, and satisfactory habit training."* The emphasis in these nurseries is, as a rule, more upon welfare needs than upon education. However, most day nursery programs borrow freely from the best techniques already tested in the care of pre-school children.

The day nursery has long existed under sufferance, since there has been doubt in many quarters as to whether it is a desirable institution. A recent survey of New York City's day nurseries† revealed close to five hundred institutions giving day care to groups of children under six. Conditions in some of them were appalling. A day nursery with a superior program is the Salvation Army Day Nursery in Baltimore, Maryland; it is described in a master's thesis by Dorothy Melby, based on her experience in introducing casework into the institution.‡

**Standord for Day Care of Children*. California State Department of Social Welfare. Sacramento. Oct. 1942. p. 1.

†Baumgartner, Leona; Goldsmith, Cornelia, and Bokhaut, Yetta, *Day Care of Little Children in a Big City*. New York, N. Y. Child Welfare League of America, Inc., May 1946.

‡Melby, Dorothy Curtis, *The Dynamics of Functional Casework in a Progressive Day Nursery*. The Salvation Army. Baltimore, Md. 1940.

The need for supervision of school age children before and after school hours increased to such an extent during the war that many day nurseries extended their age limits to include the two-to-twelve or fourteen-year olds for before and after-school care.

The nursery school is a later development, with primary emphasis upon pre-school education that will help the child form habits of friendliness, of work and of order, in addition to good physical habits. The nursery school is designed for the child from two to four years of age. Operating under the direction of a teacher trained in the field of nursery school education and child development, it provides such things as health supervision, nutritious meals, indoor and outdoor play with other children, experience with constructive materials plus a program of parent education.

EXPANSION OF DAY CARE

The depression years of the 1930's increased the need for day care over the preceding years, because even though mother's aid laws tended to keep many mothers in the home, a great number of women felt it necessary to go to work, when work was available, to supplement a husband's sub-standard wage. The White House Conference in 1930 classified the nursery service as one of relief to dependent families, and most children were cared for free of charge.* The Works Progress Administration sponsored a great number of nursery school projects in the depression years beginning in 1929; and in 1941, 1500 were operating.

Early in 1941, under the Works Progress Administration, child care centers were organized to supplement the nursery school program. Centers were authorized to be established in communities where there was a dislocated population due to industrial defense activities, and in urban and rural communities where mothers of children under six years of age in low-income families were employed and where no similar care was available. Works Progress Administration funds continued to finance day care until 1943, when the program was terminated.

With the advent of the second World War, recognizing that the new influx of women into defense work and related industries would result in a serious need for protection and care of large numbers of children, the United States Children's Bureau began to outline plans for action and to stimulate states and local communities to develop day care programs. In July 1941, a conference was held in Washington with day care

**Care of Children in Day Nurseries*, United States Children's Bureau. U. S. Printing Office. 1932.

the topic for discussion. At this conference it was pointed out that mothers should not be encouraged to work unless there was a real emergency, since children need their mothers more than ever in time of stresses created by war.

In January of 1943, the chairman of the War Manpower Commission announced plans for mobilization of American womanpower for war employment. However, the policy adopted was to defer hiring women with families except as a last resort. If mothers worked, hours had to be arranged to permit the least disruption of family life, and proper child-care facilities were to be supplied by the community—since it is the responsibility of the community to provide care for children “if their mothers *must* work.”

COUNSELING SERVICE

It was pointed out by the Children's Bureau in 1942 that there should be, as a part of a unified community program for day care, a counseling service to assist the mother who wished advice “regarding the practicability of the mother's employment from the point of view of the welfare of the children and the stability of the home.”* After thoughtful discussion with a well-qualified counselor, many mothers realized that the monetary considerations could not compensate for the damage that would be done to the child through separation from his own home. However, many mothers who had no place to leave their children flocked to shipyards and factories, leaving children alone at home or locked in cars.

RELATION OF PROGRAM TO COMMUNITY NEED

Many employers took it upon themselves to provide day care for children of their employees in order that the employees would have peace of mind and therefore be more efficient workers. The Curtiss-Wright airplane plant in Buffalo opened a non-profit day nursery in 1942, where children could be cared for from 8:00 a.m. to 4:30 p.m. daily at fifty cents per day. Henry Kaiser opened a group of day nurseries in his West Coast shipyards; the United States Maritime Commission subsidized the nurseries to the extent of \$750,000 and gave Mr. Kaiser a free hand in their design. A number of other employers throughout the United States also saw the value of such efforts.

The federal government not only assumed the responsibility for promoting day care plans, but it suggested standards and provided financial

*Lundberg, Emma O., “Counseling Service in a Day-Care Program.” *The Child*. United States Children's Bureau. Sept. 1942.

assistance for the development of adequate programs by the state and local governments.

The role of the states was to provide legislation for the licensing and regulation of institutions and agencies which cared for children, to grant state funds to local governments, to provide additional administrative and supervisory staff for carrying out the responsibilities concerned with state plans for day care programs, to appoint committees and conduct surveys which pointed out the need for day care programs, and to suggest standards for care.

The importance of the participation by federal and state governments cannot be underestimated; but the actual work of organizing planning committees, making surveys of available resources, studying the extent and type of care needed, and then proceeding to make proper facilities for care available was done by the local communities.

FUTURE DEVELOPMENTS IN DAY CARE

Future developments in the field of day care will depend greatly upon public opinion and the outcome of the discussions as to whether a child should stay closely at home with his mother at least until he reaches kindergarten age, or whether most young children should begin at an earlier age to engage in group activity and training. Regardless of the outcome of discussions, more and more emphasis will probably be placed on a program of guidance work with the families, bringing knowledge of the care and training of the child to the parents who are directly responsible for him.

The main consideration is not under what auspices day care services should be operated and from what source funds should be obtained; the important thing is for each community to determine what child care services are needed to supplement what the home and school together can make available.

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18

INSTITUTIONAL CARE

Let us assume that we have a child whose characteristics and circumstances indicate institutional care. When are we to decide that placement shall be in an institution? More than a study of the child is necessary. A knowledge of the institution is essential to the critical decision of placement. We should not make such a placement unless available institutional services are of such superior quality that they can meet this child's needs better than can other available services.

CONTRIBUTIONS OF MODERN CHILD CARE INSTITUTIONS

Let us first consider general assets and liabilities of the well-run institution for children. The advantages of institutional life include primarily an opportunity for group living through which respect for the rights and abilities of others may be recognized; regularity of personal habits; regularity of meals and well-balanced diets; impersonal objective attitudes of adults; consistent disciplines, and, if handled constructively, wholesome group competition. Group interests may enable children to attain greater social acceptability. On occasion, training a child in acceptable social behavior through the pressure of the contemporary group is sound if an objective adult sets the spirit. The child, for example, puts away his toys because other children in the group say "Here, we all put away our toys."

On the other hand, certain disadvantages are prevalent in many institutions. Some of these are overly routinized life, lack of personal freedom and initiative, restriction of friendships and social life primarily to institution population, limited opportunity for economic experience, and insufficient outlets for emotional needs.

Many of the disadvantages can be minimized in a good institution. For those children who, as a temporary experience, need organized routine and impersonal life this method of care may be effective. However, when a child cannot achieve security in this impersonal and organized environment, then the placement is defective and other arrangements should be made.

Placement of a child in an institution is not a simple maneuver. It is a complex and sensitive procedure. The person or agency responsible for determining that a child should go to an institution must know whether

this particular child will profit from the services the institution is equipped to give.

To determine whether institutional placement offers the best form of therapy for the child, a child-welfare worker must use casework procedures that give her an understanding of the life experiences and emotional attitudes to which a child has been subjected. She should also have first-hand acquaintance with the child in order to learn and understand his feelings about his present situation. Placement in many cases is the climax to a period of family and home disintegration experienced by the child. Many children in the adolescent period are breaking away from parental ties and may adjust better in a group setting.

Institutions need carefully to define their intake policies. A child should not be admitted merely because there is space for him; nor should there be inflexible regulations, relying upon tradition, to determine which child shall and which shall not receive care. Intake should be based upon broad and flexible principles allowing an institution to accept those children who, it is convinced, will profit by its program.

It cannot be emphasized too strongly that institutional placements should be regarded as temporary—for limited periods only. Regardless of how fine a program the institution has, it will tend to overprotect, overentertain and overwhelm the child over a long period of time. The continual programming in an institution cannot prepare a child for the future when he will be alone and entirely dependent on his own resources for finding friends.

Standards to which children's institutions should conform are outlined by the Child Welfare League of America. These standards are not beyond the attainment of any good institution for children, yet it is generally felt that a large proportion of today's institutions do not approach these standards.

There are three factors upon which the contribution of an institution depends: 1. the staff and their philosophy, 2. the efficacy of the services, 3. the place the institution occupies in relation to the total child-welfare program of the community.

IMPORTANCE OF SUITABLE STAFF

The first and most important element in an institutional program is the staff. Howard Hopkirk* has said, "It, more than plant and equip-

*Hopkirk, Howard W., *Institutions Serving Children*. Russell Sage Foundation, New York, N. Y., 1944.

ment, determines whether the institution is going to go, and whether backward or forward."

The director of the institution sets its tone. He must be competent. The morale of the staff depends largely on whether they have confidence in his knowledge and skills of performance. He must be fair, honest, impartial. He must be considerate. He must be sensitive to the feelings of staff and children. He must be available to the staff for individual conferences. He must enable them to feel free to make suggestions for changes they consider important. He must create comfortable living and working conditions for the staff, recognizing the need for time off and occasional opportunity for a long week-end or a night away from the institution.

The size, composition, duties, and qualifications of a staff should depend upon the purpose and function of the institution.

In selection of maintenance staff, consideration must be given to their physical, mental and moral health and also to their attitudes toward children, since they, as well as professional staff, will frequently be in direct contact with the children.

In the selection of staff, it is most essential to consider the underlying motive of the person seeking an institutional job, since salary will not usually be a major inducement.

The professional staff should ideally consist of social worker, registered nurse, recreation leader, house parents, physician, dentist, psychiatrist, and psychologist.

The social worker is the one who helps the child relate his institutional life to his past and future life; it is she who works with own or foster parents, child and community for the child's return. She is in the picture from the first to the last because she is the link that connects the child, his family, and the institution.

If it is possible to have a complete professional staff, there should be a resident physician but, if not, a registered nurse can supplement the services of a doctor employed for part time. Both doctor and nurse should have special training and experience with children. Their duties will include regular physical examinations of staff and children, use of preventive medicine, observation aimed to detect illness, the conduct of clinics, and leadership in health education.

A good recreation leader will not require play, but will stimulate it through a lively program of games and athletics offering release for physical and emotional energies. Swimming, ice skating, and roller skating should be promoted by frequent use of facilities in the community.

Hikes, visits to museums, and passive recreation such as dramatics, table games, hobbies, and movies can be vital experiences if there is a recreational leader with time and training to provide and direct these activities.

The skills and knowledges we ask of house parents are important enough to require specific training for the job. Salaries provided for house parents, however, are usually too small to repay an investment by them in preparatory training. Unless higher salaries are made available, the institution cannot count upon getting couples who are adequately trained and qualified to make real contributions to the lives of the deprived child with whom they must deal. With the situation as it is, the best that can be expected is to hire house parents with personalities pleasing to children, and with genuine affection for them; in-service training will have to do the rest.

There should not be too great a difference in ages of house parents and children. In any case, the house parents must have a youthful point of view and a keenly developed sense of humor. It is good practice to secure a married couple, provided both the man and woman are well adjusted in their marriage and both are qualified to work with children. If the house father is employed outside the institution during the day, as much should be known of his occupation, personality and attitudes as is known of the traits of the house mother.

The house mother and father naturally see the children more frequently than do other members of the staff. Therefore, their behavior and even their little mannerisms are an important factor in training. Their stability of character, cultural interests, speech, personal habits all set an example for children. Of course, they will have to be more than a good example; they will have to be able and willing to share the interests and ambitions of each child under their care. They have the greatest opportunity and the greatest responsibility for supplying the children's needs for security and affection. They can supply these essential needs when the children have respect and warmth of feeling for them.

Institutional staff members should have personal interests and avocations outside their work which give them relief from their duties, broaden their points of view and enrich their own lives and the lives of the children.

The part-time services of dentist, psychiatrist, and psychologist can be used satisfactorily when co-ordinated with the whole treatment program; staff members should be advised to make observations and take them to these specialists. It is certain that any institution could give bet-

ter service if it had full-time professional staffs, but this is not always possible or practical.

Services of a psychologist are most helpful to the institution in making a satisfactory placement in school and in planning a program for the child at the beginning of his institutional stay. Tests of intelligence, achievement, performance, and attitude should be given.

Participation in social service conferences and staff meetings can do much to enrich the knowledge of all staff members. There is a wealth of literature on child care which is available to staff. Certainly no member should be ignorant of the three fundamental needs of children; security and affection, self-esteem, thrill and adventure.

It is apparent that institutional staffs should have training in child welfare in order to carry out a vital and intelligently planned program. The philosophy of the staff members is an integral part of the success of an institution. The staff must really want to help the child become an independent, self-sufficient individual in order that he may return to a satisfying life in the community. To be most effective, staff members must enjoy living with children and gain satisfaction from watching and helping children grow and develop.

SERVICES AND PROGRAM

The program and services of an institution should be such as to take account of the difficulties of a child, help him to overcome them and enable him to develop into an independent individual capable of adjusting to his own home or a substitute home when he is transferred there.

Large institutions vary from the congregate type to those using the decentralized cottage plan. The cottage-plan institution, in turn, varies in the number of children per cottage. The Child Welfare League standards set twelve as the maximum number to be desired, but in many cases the number of children per cottage range from twelve to thirty. Whatever the number of children in the cottage, the condition there is one of group-living, and not, as it is sometimes euphemistically called, "a family." This does not mean that the purpose of a large institution is not sometimes better served by this type of home.

Small institutions, when administered by alert and intelligent people dedicated to advanced thinking in the field of child welfare, make an important contribution to children they serve and to our knowledge in this field.

Certain small institutions are paving the way in this field and are sharing the knowledge they have gained, in attempting to study and treat

children on a truly individual basis with a highly trained staff. Some of these institutions have been described in current child-welfare literature. Among these are: Hillside Children's Center, Rochester, New York; Sheltering Arms, New York City; Rice Study Home, Cambridge, Massachusetts; Children's Community Center, New Haven, Connecticut; Ryther Child Center, Seattle, Washington; Hawthorne-Cedar Knolls, New York. In moving toward a time when most of our children's institutions will be small ones committed to special treatment objective, much depends on the ability to carry out in practice the special aims for which institutions may have a contribution to offer.

DEVELOPMENT OF CHILD AS AN INDIVIDUAL

Individualization within the group is important. The program must be aimed toward helping each child to develop as an individual. Each member of the staff must know as much about each child under his care as possible. Every staff member should know why the child behaves as he does in order to help with the child's adjustment. Every child in the group must feel that he is important to staff members in the institution. Individual dress to suit the child's needs, individual hair arrangement or hair cuts are simple ways of forwarding self-esteem. A program allowing for some degree of privacy and some place (a bunk, a locker or dresser) where personal possessions may be kept is very important. Frequent and regular visits of relatives should be encouraged to enhance the child's sense of belonging and to forward interest in the institutional stay. Another measure of the success of an institution's program is the extent to which children's relatives participate. It is through the worker that the parents are advised of illnesses, given understanding of behavior problems, and offered interpretation of general progress in education and adjustment. Without interpretation and guidance, parents may become unsympathetic or afraid to show interest in the child. At the same time, the child needs the interpretation of casework to bring understanding of family situations; he needs to know that his parents are interested in his school achievement. The child's visit home and parents' visits to him should be very frequent if they help the child. The worker who has the child's confidence can determine this.

Contact with the family is paramount in deciding when the child may return home. It must be remembered that an institutional placement is always temporary, so indications of the advisability of termination should be constantly watched for. The child should always be aware of the probable duration of his stay and of what factors will be responsible

for ending his placement. When it is time to return home, the family and the child must be reconciled to the differences which occurred during placement.

After the child returns home from the institution, there is still a vital need for institutional interest. If contact with family has been frequent, and if preparation for return has included interpretation for both child and family, and if institutional interest continues after return, adjustment should not be too difficult.

Perhaps the worst feature of the old institution was its regimented, custodial life which suppressed individuality, initiative and independence. There is necessarily more routine in group living than in family living, but constant striving for flexibility can lessen the ill effects of routine. There should be as few sets of rules as possible. Just as with intake policy, there must be guides, with rules at a minimum.

There should be flexible programs of schooling, vocational training, recreation, health, religion, and social education to meet the needs of all types of children. The training program should provide facilities to promote individuality; the child who has had little schooling will need private tutoring from a staff member; the child with talent or skill should be encouraged to develop that skill whether it is in athletics, music or hand craft. A great variety of work and play opportunities should be available so the child may enter the activity which he most desires.

RELATION OF INSTITUTION TO COMMUNITY

Unless the children of an institution participate in community life, they will be unprepared to accept normal living outside of the institution. Therefore, the circle of opportunities for play, study, work, and worship with the outside world must be ever-widening. Organizations such as the band, Camp Fire Girls, and athletic teams in larger institutions can join in contests with similar groups in the community. Members of smaller institutions can join groups outside.

It is better for the children to attend schools off the institutional premises with boys and girls of the community. In regard to worship, community church activities should be available for those who wish, or whose parents wish, special denominational philosophies.

The question of money warrants special attention. A lack of knowledge of how to earn and how to spend money results from institutional care without community contacts. The part which experience with money can play in the process of guiding children to independence is most im-

portant. Real money in the form of an allowance should be given on a varying scale dependent upon age.

Within the institution, there should be jobs with pay. Older children should have the privilege of taking outside jobs such as mowing lawns and washing cars. Freedom of choice in expenditure will build up judgment and sense of values.

In addition to encouraging normal and creative lives for the children, contacts with the community serve the purpose of building community interest in the institution. The community is not often utilized as a resource for voluntary contributions of time and funds to the institution, but when it is, a friendly atmosphere between children and locality should prevail.

Institutions for children are valuable only as an integral part of a total community child-welfare plan. This can be verified through a study of the history of the National Child Welfare Division of the American Legion. After World War I, there were some zealous Legionnaires who hoped to found a large number of orphanages, but after consultation with welfare leaders such a plan was shown to be inadequate and superficial. The Legion, upon taking thought, raised a large national endowment fund and through the earnings of this fund sought to strengthen and help establish child-welfare facilities and use existing local agencies to meet the needs of veterans' children.

This Legion Child-Welfare Program functions through three phases:

1. education on children's needs and resources for meeting those needs;

2. support of sound legislation and more adequate government appropriations for child-welfare needs;

3. direct financial aid and service to children of veterans in their own homes or in any other child-welfare facility through which the child can receive the kind of care and treatment best suited to its needs; this financial aid can bridge the gap of waiting periods when local aid is not immediately available or supplement inadequate local resources where veterans' children are involved. Thus the Legion in child welfare makes itself a part of a whole state and national child-welfare program.

When the nature of the child and the circumstances of his removal from his natural home are examined and found to indicate the need of group care, that is the time to consider temporary care in an institution, but only when good institutions are available.

ROLE OF CHILD-WELFARE WORKER WITH INSTITUTION

It is desirable that the institution have its own trained child-welfare worker so that her work may become an integral part of the program and so that it can permeate into the thinking of the staff and board members. If the institution is too small to employ a child-welfare worker, it should seek the services from a co-operating agency. Since many of the institutions are receiving public wards, it seems logical that the county departments of public welfare who, for the most part, have the guardianship of these children and are responsible for their care and support should also provide the casework services of a child-welfare worker. If the work is done by a co-operating agency, then the doors of the institution should be open to the child-welfare worker from that agency at all times. If she is to have the responsibility of casework with the child's family, she should have the benefit of the institution's knowledge of the child while he remains in the institution. Visits to the institution by the child-welfare worker should be welcomed, records should be open to her, and joint conferences with the staff of the institution should be a recognized part of the program.

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ADOPTION

Definition: To adults, adoption means the taking of another's child as one's own by legal process. To the adopted child, adoption means the acquiring of a parent equivalent and a parent-child relationship.

History: There seems to be no time in the history of man when adoption did not exist. In the earliest known society, the rites of adoption included weird and grotesque simulations of birth. The Babylonian Code of Hammurabi (compiled from 2285 to 2242 B. C.) shows the actuality of adoption more than four thousand years ago. Specific laws set forth in this Code make it appear that the Babylonians were particularly interested in protecting the property rights of citizens who had adopted children and in insuring that an orphan child would be provided for, that formal acknowledgment would be made of his adoption, and that he could not be cut off from the inheritance of property without legal process.

The first recorded instance of adoption among the Hebrew people may have been when Abram assumed the responsibility for Lot, son of Abram's (later Abraham) deceased brother Haran.

The Bible refers to adoptions such as Moses' adoption by Pharaoh's daughter, and Esther's by Mordecai.

The ancient Romans practiced adoption as part of their civil law, the principal motive being to acquire heirs. Emperor Germanicus received his crown through his adoption by Tiberius, which had been ordered by Augustus Caesar.

Adoption was also an incident of early Spanish law and was incorporated in the Code of Napoleon. In the "Great Code" of Alfonso V of Castile, provision was made for investigation to show whether adoption was good for the child.

Adoption was known in the Anglo-Saxon tribes but, possibly owing to the peculiarities of feudal tenure, disappeared in England. The first law legalizing adoption in England was passed as late as 1926.

ADOPTION LEGISLATION IN THE UNITED STATES

Because the colonists brought with them the principles of the English common law, adoption as such was not known in American legal procedure until about the middle of the nineteenth century. Earlier, adop-

tion by a deed certified and filed as in a transfer of property was permitted in a number of southern states. The first state to pass a specific adoption law was Massachusetts in 1851. By 1867, three additional states, Pennsylvania, Wisconsin and Illinois, had done so. Today there are adoption statutes in all of the states.

Each state has developed its own procedures and there are no two states with identical laws. No one state can be said to have a model adoption law, but some states approximate more closely an ideal than do others.

The adoption laws in the United States are quite different from those of older nations. They pay more attention to the rights and welfare of the child as an individual and less to the property and privilege of the adoptive parent.

Early adoption laws in this country tended to provide a simple procedure whereby the person wishing to adopt a child merely had to petition the county court in the county where he resided and state who had custody of the child. If the parents were living, their consent was required. If the court was satisfied, the adoption was granted. Later laws and amendments were more specific as to the petitioner's residence; some required joint petition by husband and wife, and the consent of the child if of a certain age which varied in different states; the legal effects of adoption on all parties concerned were set forth; consent of a guardian was provided for when the parents were dead; provisions were added for the adoption of a child of either the husband or wife by a former marriage, and the illegitimate child of either.

The first law requiring a social investigation of the proposed adoptive home was passed by Minnesota in 1917. This called for a complete investigation and report with written recommendations to the court before which the proceedings were pending. It required a probationary period of residence by the child in the home of the adopting parents, and specified that the record of the proceedings be closed and sealed.

Other states have followed this lead and, in general, the trend has been to make the laws more detailed in order to include special provisions to safeguard the interests of the child. Presumably, it is the practice of the courts to consider all petitions in the light of whether the welfare of the child will be promoted by granting the adoption.

In general, the legislation in the various states concerning adoption has dealt with the following: the parties to the adoption; the court having jurisdiction; the content of the petition; the age and residence of the petitioner; consent and notice; investigation and supervision, and

by what agency conducted; the hearing; probationary residence period; the decree and the closing of the records; inheritance rights; new birth certificates; annulment, and appeal. In some of these matters, there is considerable variation from one state to another, and not all states have made provisions regarding some of them.

ADOPTION PROCEDURES IN THE UNITED STATES

The parties to the adoption are, of course, 1. the adopting parents, 2. the child, and 3. the natural parents or the person or agency having custody of the child.

The court having jurisdiction may be, depending on the state law, a juvenile or domestic-relations court; a court acting in separate sessions as a juvenile court; a court having no juvenile jurisdiction. In some states, there may be concurrent jurisdiction by two or more courts. Some laws require that the petition be filed in the county where the petitioner resides; some that it be filed in the county of the child's residence; some state that it may be filed in either, and some that it may be filed also in the county containing the institution in which a destitute child has received care.

In general, the petition to adopt a child consists of a form setting out the name and residence of the petitioner, the name and age of the child, address of parents or guardian, address of the child, and the name by which the child is to be known if the decree is granted. It may also state the occupation and age of the petitioner and possibly his reason for wishing to adopt the child. When the petition is filed, the court will appoint the time and place for the hearing.

In the majority of the states, any adult person may file a petition and if the petitioner is married, the husband or wife must join in the petition. A number of states require that the petitioner be a resident. In some states, the petitioner must be ten years older than the child; in others, fifteen years older; but in one state, any person above twenty may adopt a child under seventeen. Certain states prohibit the adoption of a child who has in him the blood of any race other than that of the adopter.

In some states, upon the filing of the petition, the clerk of the court must immediately notify the state department of welfare in writing. Thereafter, in all cases where a licensed organization is not a party to the adoption (except in the case of adoption by a step-parent when the natural parent retains custody and control), the state department of welfare must conduct investigation to determine whether the child is a fit subject for adoption and whether the proposed home is suitable for the

child. This must be done prior to accepting the natural parents' consent to adoption by the foster parent.

In all states, the consent* of both natural parents, if living, is required—with certain exceptions. In some states, the consent of the mother will suffice in the case of an illegitimate child. If the custody of the child has been awarded to the mother by judicial decree and the father for a year has willfully failed to pay for the child's care, support and education, though able to do so, the mother's consent alone will be sufficient, provided the father has been personally served by a citation requiring him to appear at the time and place for the hearing; if he cannot be located for personal service, the notice may be made by publication.

Other instances in which various states require the consent of one parent at most are: when the father or mother has been deprived of custody and control; when such father or mother has deserted the child without provision for its identification; when the father or mother relinquishes the child for adoption or gives up custody in writing to a charitable institution incorporated by law; when the father or mother has been declared insane or feeble-minded, and the superintendent of the state hospital where that parent is an inmate or a patient certifies that such parent will not be capable of supporting or controlling the child in a proper manner; where the parents are drunkards; where parents are in prison; where only mother's consent is required and she has been adjudged a street-walker.

Many states require the consent of the child if over fourteen; one state if over twelve and one if over ten. In a few states, in cases where the child has no guardian in the state, public notice of the hearing of the petition must be posted for at least ten days before the time set for hearing.

In all states, the judge is not bound by the report of the investigation; he may come to his own conclusions after hearing the testimony.

In the majority of states, provision is made for an interlocutory decree to be issued and for adoption to become final only after the child has spent a probationary period with the adopting parents. The length of this probationary period varies in the different states.

A majority of states provide that files and records of adoption be closed and sealed and opened for inspection only to the persons concerned, their attorneys or on an order of the court.

Some states provide for the issuance of a new birth certificate to the adoptive parents showing them to be the parents of the child. This provision is not adequate since some states provide these new birth certifi-

*Consent does not constitute relinquishment.

cates only for children actually born in the state, and some only for those adopted in the state.

Provision is made in approximately one third of the states for an annulment of adoptions under certain specified circumstances. The circumstance most frequently cited is development by the child of insanity, feeble-mindedness, epilepsy or venereal disease within five years after adoption.

An important section of all state statutes concerned with adoption is the one covering the subject of inheritance. Under common law, an adopted child does not inherit from or through adoptive parents except as the state statute provides.

ESSENTIALS OF GOOD ADOPTION PROCEDURES

Although great advances have been made in most of the states in the last few years toward better safeguarding the rights and welfare of children in adoption, both by legislation and by improved standards of child-placing agencies, much remains to be done before the maximum amount of protection can be assured to all concerned. Every state law should contain a provision that children should be placed for adoption only through qualified agencies licensed by the state department of social welfare, or after investigation by a representative of that department of a designated agency.

The United States Children's Bureau* recommends that the proceedings be held before a court accustomed to handling children's cases in the locality where the petitioner is known or resides. The court hearings should be closed to the public and the records should be confidential and available for examination only by the person intimately concerned or on a court order.

The Children's Bureau further recommends the following:

the consent of the natural parents should be obtained, or, if their rights have been relinquished or terminated by a judicial decree, the consent of a person or agency having legal responsibility for the child;

a probationary period of residence, preferably of a year, with the home under supervision by the state department of social welfare, should be required, to determine whether the adoption is suitable. If not, provision should be made for the removal of the child from the home;

laws are needed to deal with the adoption of children in one state

**Essentials of Adoption Law and Procedures*. U. S. Children's Bureau, Washington, D. C. Dec. 1944.

by persons residing in another. New birth certificates should be issued in adoption cases to all children born in any state, regardless of where the adoption takes place;

good adoption laws alone, however, cannot accomplish their purpose unless there are adequate safeguards in related laws—such as those affecting the relinquishment and termination of parental rights, regulation of child-placing agencies, and determination of guardianship and custody—to assure the welfare of the child and the rights and obligations of the parents. No transfer of parental rights should be valid without judicial sanction.

TYPES OF ADOPTION

In the field of adoption, as in all other phases of child welfare, the child and his needs stand as the hub around which the intricate machinery developed to meet these needs revolves. This complex structure has evolved through the years as a result of experience and increased knowledge and should continue to change to conform to changing needs.

There are four types of adoption: 1. independent adoptions, 2. step-parent adoptions, 3. agency adoptions, 4. the adoption of the illegitimate child by its father.

Independent adoptions are those in which the natural parent or parents choose a home and place their child there for adoption, or relinquish their child to a person who will place it for the parent.

In the step-parent adoptions, one natural or adoptive parent retains his custody and control of the child, but the step-parent petitions to adopt the child. This is usually done so that the step-child will have the legal rights and privileges of a natural child. The step-parent may also want to be assured that no one else will have a claim on the child in the event of the natural parent's death. Step-parent adoptions prevent the interference of the other natural parent in plans for the child.

In an agency adoption, the parents relinquish their child to an agency licensed by the state to find homes for children and place children for adoption. The agency may also include foundlings and abandoned children in its adoptive placements.

The procedure for the adoption of an illegitimate child by its natural father varies in the states. In some states it is possible for the natural father to adopt the child by publicly announcing it as his own, receiving it in his home, and treating it as his own.

Who May Be Adopted: Before a child is considered for adoption, it should be made certain that the child cannot possibly be cared for by his own family. Often a study of the situation reveals that the difficulty is

only temporary and that the child can remain with his parents or be placed for awhile in a boarding home and later returned to his parents. Adoption should never be planned for in haste or decided upon in an emergency. Ample time for consideration should be allowed the child's family, and every possible assistance offered to enable them to rear him before he is placed with a view to adoption.

In cases where natural rights to consent for adoption have been forfeited by a child's own parents, great care should be exercised by the agency in placing children for adoption. If parents do not wish to give up their children and there is any possibility that with the assistance of the agency they can provide a suitable home, action toward adoption should be delayed. Improvement of the home situation so that a child can be returned to his natural parents is always the first objective.

Agencies have set up rather arbitrary requirements as to the children they regard as adoptable and the prospective parents they will consider. It may be that many more children are adoptable than are given for adoption. As a result, many children, particularly older ones, in need of homes are never placed and many persons who would like to adopt children and could provide good homes for them are not allowed to do so. Instead of trying to place the "apparently ideal" child in the "apparently ideal" home, the agency should provide a longer and more thorough period of preparation and follow-up. This would insure a higher percentage of success even with those cases which, although acceptable, do not meet all the high standards commonly thought to be desirable. It is naturally more difficult to place an older child than an infant, but even a child handicapped by being crippled or deaf may be placed successfully under special conditions.

In finding a home for a "less desirable child," it may be necessary to place the child in a home which, according to the most exacting standard, is less desirable. Adoptive parents who are older than is commonly thought desirable may, nevertheless, provide a home far superior to the foster home or institution in which the child would have to stay if not adopted. Even a single person may, in some cases, provide a home superior to anything else the child could expect.

It has been said that "every placement is a special problem," because each child has some special need or hereditary factor which requires a specially chosen and adapted home.

Who May Adopt: In choosing the foster home, it must be determined whether the child can reasonably be assured of economic security—not wealth, but sufficient income so that he will not need to feel himself a

burden to his adoptive parents, and so that he will be able to complete his education in accordance with his capacities; good physical conditions, such as a clean, safe room, opportunity for outdoor play every day; and, most important of all, real family life, warm affection, acceptance of him as a person, understanding, and sympathy.

It is best to place a child in a home where his mental capacities, temperament and personality are somewhat similar to those of his adoptive parents and their familiars. Else he may be forced to struggle too hard to keep up with standards set too high for his level of attainment, or, if his abilities far surpass those of his family and associates, he likely will not develop his fullest capacities. Racial and religious backgrounds should also be matched where practicable.

Ideally, constitutional types, racial antecedents, appearance and temperaments would be identical. In practice, a general similarity of these factors is important. The decision here is a weighty responsibility of the caseworker, and is influenced by her sensitivity. Minimum standards set up for determining a good home should not be regarded as complete and absolute by the person selecting an adoptive home for a child, but should only be thought of as a guide in evaluating and selecting a home. A home may fulfill all requirements of a so-called standard list and yet lack so many other desirable features that it should be classified as an unsatisfactory home. Sometimes unlisted influences in a home are of much greater importance than those listed in standards.

PROTECTION OF CHILD IN ADOPTION

A social investigation before a child is placed for adoption is necessary for the protection of all concerned. In the event the child's natural parents are living, an inquiry into their reasons for wishing to surrender him may reveal a situation which can be dealt with in some other way so that the family can be kept together.

The worker's primary interest is the child, but in addition she must be prepared to extend her services to the parents who seek to adopt the child. With their entry into the case, the aspects of casework become increasingly complicated.

The applicant to an adoption agency usually believes she has arrived at her decision after very careful consideration. She has, perhaps, consulted relatives, friends, her clergyman and lawyer, who may concur in and substantiate her desire for a child. But the worker must go deeper and determine the motives in applying for a child.

Although popular literature and public sentiment may lead one to

conclude that such motives spring from a bountiful altruism, such is often not the case. It is equally misleading to believe that adoptive parents have no needs to be met and no satisfactions to be gained from adopting a child. It is the worker's task to recognize the real reasons that lie behind the request for a child in order to place the child where his satisfactions and the parents' do not conflict, but rather work to their mutual benefit.

In the majority of cases, parents want to adopt a child because they have not had one of their own. In many situations this is because of biological inability to produce a child, which inevitably results in feelings of anxiety and insecurity. The worker should be informed on current concepts concerning the causes of sterility. Sterility may have multiple causes. Reasons for sterility are hard to evaluate and many apparently true physical causes have turned out to be psychogenic. If there is a feeling of guilt on the part of either husband or wife because of sterility, how does this affect their relationship to each other? Is the sterility the sole reason for adoption? Are the parents able to accept the reality of this condition and develop constructive compensations so that they can comfortably take non-biological parenthood? If there is doubt that sterility is definitely established, what is the attitude of the applicants toward further medical study? If exploration of this shows a great unwillingness on the part of either the man or woman to have additional diagnosis and treatment when such is recommended, is this indicative of an unconscious wish to have the agency refuse their request for a child?

Applicants may give a clue as to their anxiety in regard to adoption and an ambivalent feeling about having a child when they set up a detailed list of specifications which the child must fit.

The worker should give thoughtful attention to the pattern of dependence and protectiveness that has evolved between the man and woman. Is it such that a child will inject a rivalry situation causing irritations and tensions so great that a harmonious, emotionally stable family life cannot be worked out?

When the applicants are middle aged, the worker will want to know whether they can be flexible in meeting the needs of a child.

Some applicants may insist on the utmost secrecy in regard to their application. This attitude may denote conflict or anxiety concerning adoption.

The situations in which applicants wish to bolster a tottering marriage, aid in solving problems of instability, alcoholism or infidelity, replace

the ideal of an own child who died, provide a pet or plaything for an own child, or serve as an object toward whom a woman can direct all of her emotional satisfaction are all obviously detrimental to an adopted child.

In trying to estimate the parental motive for adopting a child, the worker must try to be aware of all possible factors. She should try to discern whether the parents, in addition to bestowing love on the child, will be able to see him as an individual with qualities for growth and not merely as a satisfaction of their own needs. They should be able to accept the child's limitations and through their love and understanding help him to achieve maturity. The child should not be an object on whom they can project their own thwarted ambitions.

RESPONSIBILITY OF THE WORKER

Adoption is not a temporary placement of a child. It is a permanent placement and will affect the child for the rest of his life. It is not a normal condition for children to have substitute parents, or for families to have adopted children. Because of this, the child-welfare worker carries a great responsibility in evaluating and passing judgment on the "adoptable" child and the "acceptable" home.

As in other phases of casework, the first requisite, perhaps, is that the worker strive for self-awareness and self-understanding. It is only by scrutinizing herself that she may achieve the delicate balance of objectivity and warm understanding with which she may best serve the child. Her goal is to fulfill the needs of the child, and yet the needs which she herself brings to her work are an important factor. It is of the utmost importance that she be able to recognize in her clients, the child, the natural and adoptive parents, not only their motives and needs as exemplified in their behavior, but also the basis and cause of this behavior. The degree to which she achieves this recognition is, in large part, determined by the degree of her own self-awareness.

During the first interview, the worker should ask herself if the applicants seem to be able to fulfill the needs which the agency has found to be the child's. She should try to gauge the applicant's readiness for the steps in adoption. She must not allow herself to become too involved in problems which may seem to be present in the prospective adoptive parents. The applicant has come with a request for a child, and the worker must focus on that.

She begins by clarifying and explaining agency policies and procedures, their purpose and necessity in the light of the child's welfare. If

the role of the agency is presented skillfully, it will do much to establish a relationship which will help the worker to a better understanding of the foster parents.

If the agency calls for such action—policies vary—the worker may present the application form at the first interview. This may be either a brief form asking for information on questions of immediate concern to the agency, or a more complete type of questionnaire. The manner of presentation and interpretation by the worker is very important and can have a profound bearing on the general attitude and degree of participation of the applicants. Members of the Child Welfare League of America have pointed out the importance of this initial application.*

A vital part of the worker's services to the adoptive parents is the question of what they are to tell the child about his status. She should acquaint them early with the necessity of telling him of his adoption, but this discussion cannot be properly confined to any specific period in her relationship with the parents. The adoptive parents should anticipate that, at some point, the child will have natural questions about his own parents. This should be explained and discussed with them so that they can handle it with ease and lack of tension.

The child's questions should be met with honesty, but tempered by a timing of what and how much may be discussed with the child at a given stage of psychological development.

The services to the child begin the moment the worker and the child meet. This holds true more for the older child than for the infant. The worker should recognize that the child may be anxious and fearful, and should enable him to feel her protective interest. It is possible that early in the work with the child, the worker may be able to form a tentative estimate as to his capacity for an adoptive relationship. Her realization of the significant influence of the adoptive process on the child will aid her in her subsequent study of him. In working with the child, she gains insight as to his individuality as much from his behavior as from what he says. In noticing his use of toys, for instance, and his reaction to examinations, to other children and to adults, she may see indications of the degree of his readiness for the new experience.

Although the child must feel sure that the worker is interested in him, she must not become so protective as to negate opportunities for his growth. The fact that the child is a growing, developing being aids in his capacity for adjustment to the adoptive situation.

*Adoption Application Form. *Child Welfare League of America Bulletin*. Apr. 1944. pp. 10-11.

The worker must realize that while the interests and needs of the child are paramount, she must achieve the understanding to meet as adequately as possible the myriad conscious and unconscious needs of the natural and adoptive parents and bear in mind her responsibility to them. As a member of a professional adoption agency, she must recognize the agency's ultimate responsibility to the community whose primary interest is the welfare of the individual child.

She should carry a continuing realization of her responsibility for conformity to the legal requirements of adoption which are set up primarily as safeguards for the child but which also serve as protective measures for the adoptive parents. She has a very real responsibility to strive for better adoptive legislation which should be improved to meet the changes within the whole framework surrounding adoptions. She should be aware of the great need for interpreting the validity of legalized adoption in order to mitigate the wrongs attendant on private and non-professional placements.

If she is able to gain the support of the community for the best type of adoption program, she will do much to insure community co-operation in her work, and lessen the prevalence of undesirable adoption procedures.

RESPONSIBILITY OF THE AGENCY

Although the worker may take an active part in improving adoption programs, she does this largely on the basis of her agency's policies and views. The agency must keep its policies in conformity with the adoption statute under which it operates but the practical and emotional complications that cannot be written into even the most comprehensive law are also properly the agency's concern. In this area of the adoptive process, even the most competent agencies have not as yet been able to achieve ideal procedures. Widespread public concern has arisen, which is not entirely unjustified.

Agencies cannot dismiss such criticism as entirely illogical or uninformed, for they must gain the rapport with the community that is essential to the whole program. By paying careful attention to complaints, recognizing their valid aspects and making a sincere attempt to explain some of the difficulties encountered, the agency can do much to improve its own program and gain the support of the community to which it is responsible.

The need for most careful interpretation to the public is vital. In this area of public relations, it is possible that prospective adoptive parents

and parents considering relinquishment may be reached, and thus bring to the process of adoption a comprehension and grasp of the implications which will be of appreciable aid to the child-welfare worker. It is such reciprocal interest and understanding between the agency and the public that will prove efficacious in reaching the goal.

The agency and the worker are powerful determinants in the future welfare and happiness of the child and should never lose sight of the importance of their task. By constantly examining and evaluating their procedures and by utilizing the contributions of research findings and new practices, they may work toward an increasing competency and skill in function.

Since, in the light of present knowledge, adoption appears to offer the greatest protection to the dependent child, it devolves on the worker and the agency to expend their concerted effort toward expanding the adoption program and improving adoption techniques.

This basic requisite is then furthered and applied through the tools of casework techniques, skills in interviewing, and a working knowledge of the principles of child welfare. Through the worker's training, conscious philosophy, and experience, she is better able to serve her client.

PLACEMENT OF THE CHILD

Opinions differ as to the best age at which a child should be placed for adoption. Some believe that the earlier the adoptive parent-child relationship is established, the better are the chances for the development of an emotionally healthy child. Others contend that it is wiser to wait until the child is from a year to eighteen months old, since by that time it is possible to determine more accurately his physical and mental development. It is agreed that generally the most successful placements are made before the child is five years old, since a younger child fits more readily into a home without having built up ties and behavior habits that are difficult to break.

At placement, the worker should restate to the adoptive parents that perfectly smooth initial adjustments are rare and prepare the family for deviations from the "they all lived happily ever afterward" formula. If this is carefully done, the parents may be able to appreciate the satisfactions that lie in differences as well as similarities. The parents should also gain from the worker a sense of the agency's continuing responsibility and supervision throughout the probation period, as a means of both protecting the child and insuring a satisfactory familial adjustment.

All reputable adoption agencies keep records in which are set down

what they have been able to learn of the previous life history and ancestry of each child, the results of physical and mental tests, as well as the steps in their own care of the child.

Some adoptive parents may prefer to know nothing at all of the child's own parents. This may be due to their inability to accept the fact of non-biological parenthood or to their desire to use ignorance as a protection when the child will be ready to ask questions about his own background. Other parents will demand all available information about the child. For the protection of the adoptive parents, it is generally conceded that they should receive the family health history of the child when this is known, especially if there should be a history of epilepsy or functional psychosis. The medical history of the child should be available, along with information as to his general mental level, but not a specific intelligence quotient rating. Usually, the names of the real parents are not given unless the adoptive parents expressly ask for them. Agency policies with reference to this vary because, in some instances, the possession of the knowledge may have unfortunate consequences.

The child himself, when he grows up, will have a natural curiosity concerning his parentage, about which he has a right to learn, and if he has had a proper sense of security in his adoptive home he can accept whatever facts are available.

The factors which may operate when the child wants to know about his own parents should be clearly impressed on the adoptive parents by the agency so that they may be able to provide the understanding and support the child will need.

PLACEMENT OF CHILD BORN OUT OF WEDLOCK

In working with an unmarried mother who wishes to relinquish her child, the worker should be careful that her own feelings about illegitimacy do not cause her to adopt a too passive role as the mother struggles to reach a decision. Too active a role by the worker may constitute an equally formidable barrier to the successful resolution of this crucial period in the mother's life. While these feelings may not be easily discernible or applicable to all, an intellectual awareness of their possibilities is a beginning step in the worker's self understanding. Their complexity defies any sort of precise definition, and in few instances could one or another be isolated from the total personality. The understanding of these needs is a continuous developing process, a knowledge of the dynamics of human behavior.

Frequently it is found that an unmarried mother has surrendered her

child for adoption for economic reasons; through fear of social stigma or of ruining her chances for marriage if she kept her child; or under pressure from her family and friends, usually at a time when she was under great emotional stress and incapable of rationally considering her real desires in the matter, and that she now bitterly regrets her decision. Since over half of the children surrendered for adoption are illegitimate, this constitutes one of the greatest problems of the worker. The problem is heightened during war years, not only by the increase in total of illegitimate births, but also by the fact that many married women, in the absence of their husbands, give birth to babies by other men. In these cases, the legitimacy of the child depends on whether or not the state law provides that a child born to a married woman is presumed to be the child of her husband and therefore legitimate, with court action required to prove the contrary.

The first step in working with the unmarried mother should be the evaluation of her total situation—economic and social factors, as well as her attitude toward the child and her wishes in regard to keeping it or surrendering it for adoption. Sufficient time should be allowed to elapse after the birth of the child so that she can view the situation realistically and make a wise decision. It is desirable, where possible, to establish the paternity of the child, both for economic reasons and for the later information of the child, as well as for determination of the family history prior to adoption. Where no paternal history is available, it is necessary to have the most complete and detailed information obtainable about the mother and her family, and a little longer time may be needed to observe the child.

Some of the reasons for independent adoptions are:

1. the long waiting period necessary in securing a child through the licensed adoption agencies;
2. general unawareness of, or unconcern about, the dangers involved by those participating in such adoptions;
3. rigidity of the licensed agencies' criteria of adoptability;
4. in the desire for secrecy, frequently a mother wishes to place her own child;
5. financial inducements;
6. agencies may not be equipped to handle adoptions quickly due to shortage of personnel;
7. general lack of knowledge on the part of the lay public concerning sound adoption practices as evidenced by the apathy when protective legislation is proposed.

There are also flourishing in many areas of the country, undesirable maternity homes, some operated by well-meaning but uninformed women

and some strictly commercial enterprises, practically black-market in nature. They are apt to be attractive to the unmarried mother since they offer secrecy and prompt disposal of the baby, which are often just what she is looking for. The former in many instances are run by well-intentioned women who lack judgment in placing babies. The latter may advertise maternal care before and after birth of the child and promise to dispose of the baby though, in some states, advertising of this nature is forbidden by law. The main reasons for the success of maternity homes of these types are the scarcity of babies for adoption, the stigma of illegitimacy, and the fact that unmarried mothers do not know of the aid they can receive from the social services.

It has been suggested that social workers have not developed skills and techniques for working with the "overprivileged client," the person who has led a self-directing life and has economic security and cultural advantages. This client is one who tends to make arrangements for independent adoption. In dealing with persons of this type, the worker may feel socially insecure and hence be either too timid to ask pertinent questions or too aggressive and critical in areas of unimportance.

ADMINISTRATION OF ADOPTION LAWS

To safeguard the interests of the child, the natural parents, and the adoptive parents, it is not enough that a good adoption law be on the statute book. A good law poorly administered can be subjected to many abuses.

To secure good administration of a law requires public support. If the people are not interested and do not support the law, that particular law loses much of its effectiveness. Much of today's activity in child placement by unethical persons and organizations exists because of inadequate laws; but a "model adoption law," though it may cover up inadequacies, will not in itself cure all of the evils.

What is needed in addition to the law is an enlightened public made keenly aware of its responsibility in seeing that the welfare of all the parties to an adoption are protected. This will not be attained easily. It will have to come through an educative method, drawing upon the normal channels of disseminating information. Articles in the press and magazines, radio talks, addresses before clubs and organizations, are some of the methods that can be used to draw public attention to the facts.

A good adoption law backed by a good administration could find its effectiveness and direction of purpose hampered if related laws on the

statute books were inadequate. Laws dealing with such questions as determination of guardianship and custody of a child, the relinquishment of parental rights, and the regulation of child-placing services must all provide for the welfare of the child, together with the clarification of the rights and obligations of the parents.

If the United States as a whole is to have good adoption procedure as well as related child-welfare laws, it is necessary that some uniformity as to standards exist among the states.

A state with adequate child-welfare laws, properly administered, might discover that its own high standards were being circumscribed by a neighboring state having inferior laws and administration. The phenomenon of migration to do "business" in the state with lax laws has many precedents and examples and could occur in adoption. A state with inadequate child-welfare laws and poor administration could prove a haven for "traders in children." Because the demand greatly exceeds the number of children available for adoption, unethical maternity homes could find it profitable to establish themselves in the lax state, pay the cost of transportation of an unwed mother from her home state, and simply add this to the fee charged to the adoptive parents.

The best insurance against having a thing such as this occur would be for all the states to have good child-welfare laws well administered. In order to eliminate independent placements, it is necessary to educate the public as to what is involved when children are placed for life; get good legislation to provide and finance sound placement procedures; and adjust the programs of social agencies to the task of changing the conditions—that is, getting the point across to the public.

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PART SIX: *Unmarried Parenthood*

20

EARLY PHILOSOPHY AND TREATMENT

The child born out of wedlock and his unmarried parents present special problems wherever society discriminates against them because of illegitimacy itself.

Children have been horn out of wedlock ever since there has been any form of marriage, but earliest records show that the attitude toward this depended upon the traditions of the particular culture. Among some primitive tribes, then as now, a young woman who had borne a child was considered a more eligible spouse.

Among other primitive peoples, the man who committed adultery or fornication was killed, or flogged, or suffered having his head shaved, or was disfigured in some other way. A woman found guilty of either of these crimes was beaten, killed, or disfigured.

When children have been born out of wedlock in more complicated monogamous societies, always the mother and child have suffered. Harsh punishment for the mother and denial of legal rights to her child have been the general rule.

Katharine Lenroot, Chief of the United States Children's Bureau, states: "By and large, the illegitimate child arrives in the world an unwanted child in a society which has punished him, willingly or not, for his parents' disregard of convention. Instead of coming into a family group which is set up to give him care, affection, and individual attention, he has only the impersonal body of law to defend his welfare. Without knowledge of the law, the mother may pass him on to someone else, so that in addition to being deprived of normal home life and parental care and support, he often suffers from poverty, poor living conditions, immorality or delinquencies on the part of those responsible for his care, and from frequent shifting from home to home. His infant mortality rate is higher, and there are more dependent and delinquent children among illegitimate than legitimate children."*

The future of the illegitimate child is more irrevocably set by society's laws than that of the legitimate child who has the family to intercede for him in life.

*Lenroot, Katharine, "Social Responsibility for the Protection of Children Born Out of Wedlock." *Annals of American Academy*. 1921. pp. 124-26.

There has been considerable variation in the terminology used in referring to the child born out of wedlock. During the periods when his status has been less favorable, the term bastard was used or "*filius nullus*" (nobody's son); the terms illegitimate child, love child, child born out of wedlock, or natural child seemed to be used when he was given more consideration.

We find the Biblical injunction: "A bastard shall not enter into the congregation of the Lord . . ."* Again, in early Athens there is an account of how Pericles picked out five thousand bastards, as defined by Athenian law, and sold them into slavery. As a sequel to the latter reference, it is interesting to note that Pericles had a son by Aspasia who was not his lawful wife. But in this case, he set the law aside and granted all citizenship rights to his own son.

In the Middle Ages in Europe, the children born out of wedlock were literally "nobody's children," having no legal claim on mother or father. They were usually kept in the class of serfs. It was during this time that foundling asylums were established by religious organizations on the continent of Europe as a preventive for infanticide which was common.

The first foundling asylums were established in Italy in the sixth century and in the course of time they were to be seen in all the large cities of western Europe. At the end of the twelfth century, Pope Innocent III introduced in a Roman hospital the first "tours" or turnboxes, a sort of rude cradle, one side of which was left open to the street to receive an infant. Any mother wishing to leave a baby, placed it in the box, rang a bell, and slipped away undiscovered; the child was received into the home.

Spain and Portugal soon followed this practice. Turnboxes were introduced into France and Belgium in 1811 and later into other countries. They are still used in some places.

In England, the first foundling hospital was established in London in 1739 through public funds. At that time, unmarried mothers, when found with their children, were forced to do penance in a public church before the entire congregation or punished severely by other methods of torture. To avoid such treatment, many of them murdered their infants and the hospital was founded as a place where they might leave them instead.

LEGISLATION

The cruelty of the common law in England in the sixteenth and seventeenth centuries was such that there resulted a great increase in the

*Deuteronomy, Chapter 23, Sec. 3.

number of illegitimate infants that were reported dead at birth. This situation led to the enactment of an English statute in 1623, making infanticide a capital offense punishable by death, as for murder, unless the unwed mother reported her pregnant condition and had at least one witness who could testify that the child was stillborn.

In France, although bastards were serfs in the Middle Ages, by 1789 they were not outcasts, though still treated as inferior to legitimate children. In 1793, a new law was enacted. It stated that the rights of the illegitimate child should be the same as those of other children. "There will be no more bastards in France," declared the proponents of this law.

Illegitimate children in the French Republic were granted, in 1896, what amounts to equal inheritance rights. By 1912, the establishment of paternity, where requested by the mother or child, was a legal responsibility of the state.

CASTBERG LAW

Between 1892 and 1915, organized labor in Norway was behind the movement to enlarge the rights of illegitimate children. Some of the resolutions were introduced into the government conventions by Representative Johan Castberg and because of his activity in the matter a bill which was passed in 1915 bears his name.

The Castberg Law, still effective, placed the responsibility of establishing paternity on the state and required the mother to report the facts about paternity to the local authorities who then followed through on the legal establishment of paternity. Contributions for the child's maintenance, in accordance with the standards of living of the parent in the better circumstances, were to be made until the child was sixteen years. Then, if either parent was so situated that he might reasonably be expected to make contributions to continue the education of the child beyond its sixteenth year, he could be ordered to do so.

Where the question of paternity remained undetermined because of the involvement of more than one man, each man was to contribute a certain amount.

The father was responsible for the cost of the mother's medical care and for her maintenance during those periods before and after confinement when she was unable to work. The state took the responsibility for collecting the maintenance.

The child inherited from the parents as if he were a legitimate child. However, if there was only the presumption of paternity, he would not inherit from the possible father but would only receive maintenance.

Legitimation of a child by the subsequent marriage of his parents was made possible by this law.

In early England, the illegitimate child was the responsibility of the parish and was treated like any other vagrant or poor person. In order to protect the taxpayer and relieve the burden on the parish, the Elizabethan Law of 1576 made the father and mother responsible for the support of the illegitimate child.

The law declared, in 1609, "Every lewd woman which shall have any bastard which may be chargeable to the parish shall be committed to the house of correction, punished and set to work for one year."

In 1662, the parish was authorized to seize the property of a mother or father who ran away leaving an illegitimate child dependent on the parish.

An act was passed in 1744 to make more effectual the laws relating to rogues, vagabonds, idle, and disorderly persons. By its provisions, a woman who wandered and gave birth to a bastard child in a parish to which she did not belong and became dependent should be publicly whipped (naked above the waist until she became bloody) and committed for six months to the house of correction.

The next century saw a change in attitude. An act of 1844 gave the primary claim for support to the mother instead of to the poor law authorities and emphasized the liability of the father as against the mother. Thus the father now became primarily responsible for the support of the illegitimate child just as he was for the legitimate child of the legal family.

In England's early history, legitimation after birth was possible if the parents had been free to marry at the time of the child's conception. The Statutes of Merton in 1236 ended this, however, except in cases where Parliament granted individual permission. There was a gap of almost six centuries before the Legitimacy Act of 1926 permitted legitimation after birth, without parliamentary intercession, in cases where the parents had been free to marry at the time of birth.

Denmark has an interesting solution of the support problem of illegitimate children. There the liability for support is apportioned among all of the "possible" fathers.

In Russia, no legal distinction is drawn between legitimate and illegitimate children.

American legislation on illegitimacy is patterned after the English law, and was introduced into the colonies at an early period. The mother of a child born out of wedlock was referred to as a "lewd" woman and

her child was known as a "bastard." The stern religious code of the Puritan settlers often required the mother to confess her sin before the church congregation. She might be placed in stocks, publicly whipped, imprisoned or, like Hester Prynne in Hawthorne's "Scarlet Letter," be sentenced to the lifelong wearing in public of a scarlet letter "A" for "adulteress."

Although an element in the cruel treatment of the unmarried mother and child was the desire to protect public funds, the father of the child actually faced little inconvenience. His responsibility was hard to prove, and burden of support was placed on the mother. If she could not carry it, the child was exposed to whatever methods the community had of caring for dependent children.

A general law was enacted in Connecticut in 1645, which specifically defined the requirements for conviction of the father and support of the child. Similar statutes in other states quickly followed.

Regional conferences on illegitimacy were organized in 1920 at Chicago and New York by the United States Children's Bureau and drew the attention of the public to the social costs which result from neglect of children of unmarried parents. The extreme variation and lack of progress toward sound, modern, social thinking in the laws of the various states relating to the child born out of wedlock were recognized as a serious social problem.

Professor Ernst Freund* in 1921 presented to the National Conference of Commissioners on Uniform State Laws (an organization of lawyers in the United States) a proposal for a uniform law on illegitimacy.

Although drawn up twenty-five years ago, the proposed uniform Act has been adopted with few changes by only five states, Iowa, Nevada, North Dakota, South Dakota, Wyoming, and, in part, by two others, New Mexico and New York. Nevertheless, this Act was a distinct advance in the socialized procedures it contributed to paternity proceedings.

Most states have lagged far behind the thinking represented in the Act and have not passed legislation which would equal or improve upon this measure. Some few states have gone beyond the recommendations that were made by the National Conference of Commissioners on Uniform Law and adopted by the Bar Association in 1922.

Some of the most significant and effective provisions made by the laws of different states, or that could and should be made, are:

*Freund, Ernst, Professor of Jurisprudence and Public Law, University of Chicago Law School. *Illegitimacy Laws of the United States: Analysis and Index 1919*. Government Printing Office, Washington, D. C.

elimination of the terms bastard, bastardy, and illegitimacy from all laws relating to the child born out of wedlock;

initiation of court action only by the mother or a welfare agency and at any necessary time regardless of the age of the child;

the hearing of paternity proceedings in a court which deals with children's cases, or one involving domestic relations, equipped to make a social investigation before the hearing and to provide casework services;

some method by which cases could be settled out of court entirely, or by civil action, and not involving criminal or quasi-criminal procedure;

a way to change, modify, supervise and enforce support orders, and to provide adequate supervision with approval by the court.

Social agencies and social workers have written a great deal on the subject of whether it is advisable to initiate paternity proceedings; they have tried to view the question from the standpoints of the child, the mother, the father, and the community.

MINNESOTA LAW ON PATERNITY

If we turn to the state of Minnesota and note the purpose of its early law and that of its modern legislation for establishing paternity and obtaining parental support of the child, we find an interesting contrast.

The purpose of the early law was interpreted to be "to enforce upon a father the natural duty which he owes to his illegitimate offspring, and to prevent its becoming a public charge."

A law enacted in Minnesota in 1927 stated its purpose to be "to safeguard the interests of illegitimate children and to secure for them the nearest possible approximation to the care, support and education that they would be entitled to receive if born of lawful marriage, which purpose is hereby acknowledged and declared to be the duty of the State."*

PROGRESSIVE LEGISLATION

In recent years there has been a strong tendency in other states, as well, to protect the child. The more progressive and enlightened courts in this country now hold that the chief purpose of a paternity proceeding is to secure the health, welfare and happiness of the child.

Most of the states have provided that on the marriage of the parents the child becomes legitimized. There is, however, some variation. In Louisiana, only the child of persons who might legally have married at

*Fooner, Michael, "Some Child Welfare Problems in Social Insurance." *Social Service Review*. Vol. VI, pp. 650-657, Dec. 1942.

the time of the child's conception may be legitimized by the marriage of his parents.

The child's rights of inheritance are now allowed to some extent in all states. Most states permit an illegitimate child to inherit from his mother equally with her legitimate children, though there are many exceptions and limitations. The statutes of twelve states provide that an illegitimate child cannot inherit from his father unless the father acknowledges the child in the presence of witnesses. Arizona and North Dakota, on the other hand, have attempted by law to wipe out all distinction between legitimate and natural children.

Illegitimate children may not receive benefit rights under Federal Old Age and Survivors' Insurance. "The exclusion arises out of sec. 209 (m) of the act, which requires that any individual applying for benefit must have a legal relationship to the worker from whom benefit rights are derived; a relationship that would be recognized as legal under the intestacy laws of the worker's domicile."*

The standards devised by the different states in regard to property rights are thus made the basis for the dependent, illegitimate child receiving insurance benefits.

The definition of a dependent child in the Social Security Act makes grants to the unmarried mother possible unless a state chooses to interpret this differently. The aid is not being used widely among the states. In some states, this may be due to lack of casework skills required for maintaining an incomplete family unit such as is necessary to qualify for aid to dependent children. In other states, it is due to narrow interpretation of the provision.

PATERNITY PROCEEDINGS

Some of the modern thinking on the subject was summed up in a discussion given by Maud Morlock† of the United States Children's Bureau at the National Conference of Social Work in 1940. She stated that questionnaires had been sent by the Bureau to fifty-five public and private agencies in thirty-three cities in seventeen states regarding their policies of advising or encouraging unmarried mothers to take court action against the putative fathers in order to establish paternity of their children.

Most agencies and social workers recognize the serious social and emo-

*Fooner, Michael, "Some Child Welfare Problems in Social Insurance." *Social Service Review*. Vol. VI, pp. 650-657, Dec. 1942.

†Morlock, Maud. "Establishment of Paternity." *Proceedings of the National Conference of Social Work*. Columbia University Press. New York, N. Y. 1940. p. 364.

tional factors involved in the court experience for the mother and believe that what it involves should be worked out with her before she makes her decision.

Casework treatment to help her understand her attitude toward the father, and her feelings in regard to her child, is also an important part of the philosophy in regard to the mother.

Since, in some states, court action to determine paternity must be taken before an unwed mother may receive aid, discussion of this factor also is regarded as important. It should be mentioned here that the Social Security law makes no distinction in aid to dependent children as between children of legitimate or illegitimate birth.

Recommendation has also been made by many agencies that the statutes should be amended to provide humane treatment for the mother by having closed hearings in a court action to determine paternity.

There are many arguments against legal proceedings. The present emphasis on criminal or quasi-criminal procedure would not seem justified in view of the social and emotional factors at stake. If paternity could be acknowledged by the father in an agency interview and later in closed chambers, thus saving the mother, father, and the families involved from the distastefulness of a public court proceeding, a great step would be taken in improvement of existing laws. State laws should be liberalized to make this possible.

If the father gets his first knowledge of fatherhood through a notice to appear at an agency or a court, or through arrest, it may, understandably, be difficult, if not impossible, to obtain his co-operation later.

Present legal procedures are futile in regard to collecting support money even when judgment is rendered. The Children's Bureau has found that forty-four per cent of the men forced to pay are in arrears within two years after the court proceeding; seventy-three per cent, within five to seven years after. There is no machinery in our laws for enforcing these orders except to put the fathers in jail.* This procedure would not benefit the father, mother, or child. The idea of punishing the father of the child born out of wedlock still dominates many of the state laws.

The ambivalence of the public attitudes toward the unmarried father and mother is partly responsible for the unreasonableness and inconsistency of laws regarding the establishment of paternity. The laws are both punitive and protective. The most striking feature of existing

**Op. cit.*

paternity laws is the large number that are wholly unadapted to modern social conditions.

Against the background we have sketched, let us consider the present philosophy, problems, and programs for the care of children born out of wedlock, and of their unmarried parents.

What is the extent of the problem of unmarried parenthood in the United States?

According to the United States Bureau of the Census, approximately 80,000 live births out of wedlock are reported each year for the nation.* However, because ten states† do not record illegitimacy on birth certificates and therefore do not report illegitimate births and because many illegitimate births in other states are registered as legitimate, the real figure is much larger.

Statistics reveal the infant mortality rate is fifty to one hundred per cent higher in illegitimate births than legitimate births. The immature ages of some of the mothers, the generally adverse economic and social conditions surrounding both the infant and the mother, plus ignorance, secretiveness, and willful neglect are some of the factors responsible. Maltreatment during or immediately following birth may be responsible for many infant deaths.

Miscarriages, abortions, premature births, and still births are more numerous among illegitimate births. Still births are generally higher among first births, and illegitimate births are predominantly first ones.‡

The death rate of mothers from causes connected with pregnancy and childbirth is found to be about twice as high for unmarried as for married mothers. There are several obvious reasons. Unmarried mothers are more likely to continue working until delivery is imminent. Often ordinary health provisions are ignored and the girl deliberately starves herself and wears extremely tight clothing to conceal her condition. Then, too, syphilitic infection is considerably more frequent among unwed than wed mothers.

THE UNMARRIED MOTHER

What of the people represented by the foregoing figures? First, the unmarried mother. Who is she? Twenty-five per cent are youngsters

**Service for Unmarried Mothers and Their Children*. U. S. Children's Bureau. 1945. p. 2.

†California, Colorado, Connecticut, Maryland, Massachusetts, Nebraska, New Hampshire, New Mexico, New York, and Wyoming.

‡Hankins, Frank C. "Illegitimacy." *Encyclopedia of the Social Sciences*. 1935. p. 581.

from ten to fourteen years old and approximately seventy-five per cent are between fifteen and twenty-four years old. Of this latter group forty-five per cent are between fifteen and nineteen, twenty-seven and ninety-ninth per cent between twenty and twenty-four. Forty per cent are white, sixty per cent non-white.* About forty-nine per cent live in small towns and rural areas. The fact that slightly more are in the cities is partly due to the fact that unmarried pregnant girls often escape to urban centers to hide their condition.

What is the unmarried mother like, and why did she become an unmarried mother? The answer to this question is a complicated one. Seemingly the reasons stem from problems and emotional conflicts of early childhood.

Most of the studies of unmarried mothers indicate some common elements in their backgrounds. Few of them have happy, secure relationships with both of their parents. The family situation has been in some way distorted. There are conflicting feelings of love and hate.

For many a girl, pregnancy is an act of defiance related to her family. She not only punishes her family, but at the same time punishes herself for having these aggressive feelings toward her family. Later, she may punish her baby by rejecting him.

Some of these girls have difficulty in their relationships with both men and women. Sometimes they are able to carry on superficial contacts with casual acquaintances and friends but are not able to enter into a close and lasting relationship with anyone. Many of these girls are unhappy because of unconscious needs and seek a way out of their emotional dilemma by having an out-of-wedlock child. Some of them are attempting to establish their femininity. Some are rivals of an older sister. It is not strange that seldom is a girl found among them who genuinely cared for the father of her baby.

Girls whose feeling of loneliness is increased by lack of tenderness in their home environment are prone to misinterpret a mutual sexual desire to possess as mutual tenderness.

Frequently, in talks with agency workers, unwed mothers show a similar behavior pattern. They want to get money, attention, interest, and love for themselves—as though they were still in the midst of the strife and conflict of adolescence. They could not accept responsibility, but must project it on the agency, worker, parents, or father of the child.

Possibly it will help to visualize the position of the unmarried mother

*Morlock, Maud, "Services to Unmarried Mothers." Paper read at the Conference of Florence Crittenton Homes. Toledo, Ohio, May 22, 1944.

if we compare her with the married woman who has the sanction of our culture and society. In contrast to the happily married woman who has desired pregnancy and a child, who may be surrounded by love and acceptance, we find the unmarried mother cutting herself off from every source of love and friendliness she has ever known. She may be overwhelmed by fear and guilt with nine months of disillusionment and lovelessness ahead of her. Under the circumstances, she fails to build up a reserve of real love to invest in the baby.

Florence Clothier, M. D., says that "illegitimate motherhood, like all motherhood, has as its psychological background an urge to solve old conflicts and fulfill deep personal needs."^{*} She says also that many times the unmarried mother has been overly restricted and sheltered during adolescence. During this period, while she may have been overtly compliant and extremely "good," she was accumulating hostile feelings which resulted finally in a pregnancy—an aggressive act against her parents.[†]

The thought is expressed by some workers handling unmarried mothers that where the unmarried mother had a dominating father, usually their experiences with the fathers of their babies were not happy. They may have been driven to find in reality a figure to play the role of the loving father who was absent from their childhood; they may have been denying their own fathers, or re-experiencing with a lover much the same kind of masochistic relationship they had with their fathers. Very often, there has been a death of the father or desertion by him early in the girl's life. In these cases, Doctors Kasanin and Handschin,[‡] suggest that the pregnancy is an expression of the Oedipus situation which was not resolved in childhood because of the death or desertion of the father.

In the cases where the unmarried mother has had a dominating mother, there is a striking similarity between the girl's relationship to her own father and her relationship to the father of her baby. She may take the baby into the home of her mother and place upon her the responsibility for his care. If she cannot do this she may show little conflict about placing the baby for adoption.

The least mature girl, and also the girl raised in the impersonal at-

^{*}Clothier, Florence, "Psychological Implications of Unmarried Parenthood," *American Journal of Orthopsychiatry*, Jan. 1941.

[†]*Op. cit.*

[‡]Kasanin, J. and Handschin, Sieglinde, "Psychodynamic Factors in Illegitimacy," *American Journal of Orthopsychiatry*, Jan. 1941.

mosphere of an institution, often fight to keep their children. Theirs is a desire for possession. By keeping their babies, they often try to satisfy their need for human contact. This feeling is not one of the best ingredients of good motherhood.

More frequently than not, the unmarried girl wishes to conceal her pregnancy from the father of the child. This usually has one of two motives—denial of a positive emotional relation to him, and narcissistic fear of being rejected and condemned by him.

What are the unmarried mother's needs? First of all, she needs to know, as does any expectant mother, where she can go for medical care by a qualified physician. She is usually bewildered, ashamed, full of anxiety, and very much alone. She has feelings of guilt and fear and discouragement. Where will she be treated as a person in need of medical attention and advice and not as a public offender?

Those agencies within a community which provide medical and casework services to unmarried mothers should be known to those to whom the girl is most likely to go first for help: physicians, lawyers, nurses, ministers, teachers, personnel supervisors in factories, offices, and stores. In fact, all agencies, public and private, providing social service to an unmarried mother should make their services a part of common knowledge. Newspapers and women's magazines, including the "love story" variety, are excellent advertising media for this purpose.

The Children's Aid Society of Ogden, Utah, has published a poster describing its services: "The Doctor, The Lawyer, The Mother, The Baby, The Adoptive Parents."* It explains what the agency can do for each. Some lawyers display it in their offices. Doctors are referring more clients to the agency than formerly.

Frequently, it is to a doctor the pregnant girl turns first. What, then, is his responsibility in such instances? Essentially, it is the same responsibility he has toward any obstetrical case—to give the best medical care before, during, and after delivery, plus the additional responsibility of referring the girl to the proper community agency for casework service when she first comes to him for help.

If a medical social worker is giving casework service to the doctor's patients, the doctor and the worker must co-operate in helping the unwed mother to attain a complete physical and psychic recovery.

Where there is a nurse it is her responsibility, like the doctor's, to maintain the same high standard of service to the unwed mother that

*"Birth Out of Wedlock." *Children's Bureau Publication, No. 973*, May 1945.

prevails in other obstetric cases. If the doctor has not referred the patient to the proper community agency, the nurse should do so.

Neither the doctor nor the nurse should assume the responsibility of a child-placing agency. That many do so is an established fact. In many instances, the independent placers are not heartless traffickers in human beings but are essentially compassionate, kindly persons who have no conception of the dangers involved. Many doctors, feeling sorry for the panic-stricken unmarried mother, upon her request will find a couple wishing to adopt a baby and arrange for them to pay the girl's complete medical expenses in return for the baby.

HAZARDS OF HURRIED PLACEMENTS

Generally, the scarcity of babies permits ample opportunity for unscrupulous individuals to "place" babies at a considerable profit to themselves. Hence, at the baby's birth, a time when she should not have to make such an important decision, the natural mother is often subjected to considerable pressure to relinquish the child.

Regardless of the motives of the independent placer, the dangers inherent when the placing is not done through a recognized social agency are the same—dangers to the child, the adoptive parents, and the natural parents.

The child's happiness is at stake. If a separation from his natural parents assures him his best chance for happiness, certainly his adoptive parents should be carefully chosen by people professionally trained in this work.

The unmarried mother has both a medical and social need and it is the responsibility of the hospital which gives confinement care to meet this complex need. If it is to be done adequately, a carefully individualized service and a special type of skill are required. This skill is not a part of the training which the doctor or nurse receives, but it does belong to the medical-social worker. It is her responsibility to interpret medical-social problems to the patient, physician, and the worker in the child-welfare or family agency; and to co-ordinate medical service with community and home resources. Interpretation and reinforcement of the doctor's plan for medical care are sometimes very important in cases where the mother disregards medical advice as an expression of resentment toward her situation.

The same casework skills are used with unmarried mothers as in any casework. The girl should have the services of a skilled social worker as early in her pregnancy as is possible. Some mothers may wish to remain

in their own homes until the time of birth; the non-resident mother who needs immediate placement away from home will probably use the maternity home if one is available.

MATERNITY HOMES

If the maternity home is well managed by a competent staff, has a flexible policy and is homelike, its impersonal atmosphere may be especially useful for the young, rebellious girl who has rejected or has been rejected by her family, and it may also serve the need of the frightened girl. The distinguishing feature of the maternity home is that it provides care for the mother and child after confinement. It may have its own hospital unit or rely on community hospital service. Increasingly, maternity homes are affiliated with social agencies—as, for example, the Florence Crittenton and the Salvation Army homes. The maternity home is needed by a relatively small number of unmarried mothers. Hospital and foster-home care for the mother and child may meet the need better than group care.

Maternity homes should be carefully regulated by the states. Specifications for their operation should be clearly given in statutes and their licenses should be revoked when at any time these specifications are violated or ignored. The authority for licensing should be vested in the department of public or social welfare.

Maternity homes are valuable only if used in regard to what they can offer to further the girl's development and understanding of herself and her relation to her child.

Her stay in the maternity home should be as short as is consistent with good casework. Therefore, the home should not undertake an extended program of education or vocational training or retraining. It should adapt its program to the individual case. There should be no prescribed time for admission of the girl or for her discharge. There should be no indication given to the mother as to whether she is expected to give up or keep her baby.

Maternity homes for unmarried mothers should offer medical care at standards equal to those of the general hospital as a factor in reducing the mortality rate of mothers and illegitimate children. From this aspect, their location, building construction, equipment and personnel and system of reports and records should be given consideration when they are inspected preparatory to licensing.

There is something more than the medical side to be considered in regulating maternity homes serving unmarried mothers. Laws should

particularly call attention to the fact that the license to operate a maternity home does not include the right to place children. The general public often thinks of a maternity home as a direct source of supply when people want to adopt a baby, and it would be difficult for the home's superintendent to resist the pressure of prospective adoptive parents and their lawyers if the true function of the home were not limited and made clear by law.

Every girl in the maternity home has an intense problem. Being an unmarried mother in a society such as ours is not acceptable behavior. The unmarried mother has to make some sort of adjustment to the community and with herself which will include consideration for the welfare of the child. A good maternity home, then, should meet the physical and emotional needs of the unmarried mother in accordance with today's highest standards. Therefore, the maternity home needs to have on its staff or available to it the services of a social worker, a psychiatrist, and a psychologist.

Perhaps the ideal adjustment of the mother lies in a foster home, if she cannot remain in her own home. Life in a happy, normal home where there are other children and an understanding foster mother may give to the unmarried mother who has never known satisfying relationships a sense of belonging for the first time.

There is also a need, and a great one, for more trained caseworkers; no worker should have to carry a case load of more than thirty-five unmarried mothers.

FUTURE OF THE CHILD

After the worker has helped the mother to decide where she will go to have her baby, casework with the mother should focus on future plans for the child. In her contacts with the mother, the worker should get across to her, not in a judgmental way but on the basis of need in the future, the realities to which she and her child must adjust.

She discovers, through discussion, how the mother feels about establishing paternity of the child. We now believe that paternity should not be established for support alone, but that the relationship of the mother to the father is the important consideration. This should be explored with the mother—and father if possible. Maybe these feelings can be worked through and paternity established—in some cases, marriage may result.

If the mother is one who was deprived of love and affection in childhood and is resentful of her mother, she may decide to keep her baby at all costs; but in the relationship with the worker, she may be able to

release these feelings and come to a decision about the baby which is based on the welfare of the child and not upon her own earlier deprivations. Studies have shown that no matter how inadequate the mother's parents were in their role, if they were able to be uncondemning and genuinely concerned in this crisis, the unmarried mother invariably desired to give up the baby for adoption as the most realistic solution. She no longer needed to defy her parents.

Experience of social workers in child-guidance clinics and child-placement agencies indicates that an unmarried mother is seldom capable of giving sustained care and security to her baby. Even though she decides to keep her child with her, this doesn't mean that in most cases she will stay at home caring for her child. It usually means she must find work and put her child in a foster home anyway. After a few months or a few years, the strain of maintaining a child whose development and emotional life are tied up with a foster mother is too great. She often loses interest, fails to pay board, or becomes jealous of the child's relationship to the foster mother. Then she either deserts the child or causes his replacement; the child may be neglected in an inferior home where she has placed him or he may become a behavior problem as a result of insecurity and serial replacements. In these cases, he comes to the attention of the agency perhaps for the first time.

In our groping for solutions, we have shifted from one philosophy to another. Many workers feel that separation of the mother and child immediately after the birth is bound to be a traumatic experience leaving its mark upon both. There was a time when interested persons urged a law requiring the unmarried mother to nurse her child for a period of three months; the hope was that she would become so attached to it that she would be unwilling to give it up. Some of the children whose mothers did not give them up, but rejected them nevertheless, are unhappy and ill-adjusted.

Later the prevailing idea was that the social worker should take a passive role so the mother could reach her own decision. Now it is realized that many of these girls require help in reaching their decisions and we have recognized the need for further study of what has been tried and what procedures we are to use.

The problems which face the unmarried mother who keeps her child are great. She has the very practical question of finances; finding suitable employment is a problem in itself. Many fields are practically closed to her because she has a child born out of wedlock. Through bitter experiences, she will learn that the social handicap may be as extreme as

any physical handicap could be and far more difficult to overcome, and she must have the courage to meet them. Ultimately, the cramped existence which her status and the combined responsibilities of bread-winner, homemaker and mother force upon her may cause her to reject the child emotionally if not in a more apparent way.

If she attempts to keep her child's illegitimate birth secret, she lives in perpetual fear of discovery. This results in constant insecurity for both mother and child.

The mother should be given every opportunity to decide whether she shall maintain her child or give it up for adoption. The worker must guide her to her decision, not by urging her in any one direction but by making sure she is aware of the advantages and disadvantages of either plan. If adoption is indicated early in the contact, much of the casework should be done before the birth of the baby so that the mother is prepared socially and psychologically to give it up shortly after birth.

The caseworker needs to examine herself: has she a need to have a client decide some particular way? This self-examination should leave her free to enlighten the client about the various alternatives and then to handle the casework relationship with a clear understanding of the client's needs.

Workers need constantly to remind themselves that the unmarried mother has been faced with disapproving, hostile, sometimes cruel attitudes before she came to the social agencies.

FATHER OF CHILD BORN OUT OF WEDLOCK

At this point, some attention should be directed to the unmarried father. Who is he? What is he like? What are his attitudes toward his parenthood?

We cannot group all unmarried fathers as a single type. Some are well educated, reared in comfortable homes, successful in school or business, personable, and charming. Others lack some or all of these attributes.

Some studies that have been made show us interesting variations within the group.

A study made by the Council of Social Agencies of Rhode Island showed that in this small group the unmarried father was likely to live out of state, and be probably eight or nine years older than the mother. Chances are great that he, too, will be unmarried; however, twenty-three per cent of the putative fathers were living with their wives and legitimate children. He may have completed high school, the study said. It is improbable that he will assume much responsibility for the child and

there is little chance that he will marry the mother. The Council raises several unanswered questions at the end of its study: was there marital disharmony between the man and his wife in the twenty-three per cent of the cases that a social worker might have helped them work through? What were the father's emotional reactions to the child born out of wedlock and its mother? There was no information given in the casework records studied which would give any clue to his feelings.

Marguerite Marsh* refers to a study made by a group of caseworkers from two agencies in New York City and Newark, New Jersey, as follows:

"The unmarried father was seen to be not only an individual but also a member of any one of several groups possessing similar characteristics which conditioned their attitude and that of the mother. There were the chronologically adult but emotionally immature men unable to accept the responsibilities of marriage and family life. There were men in the late twenties, financially unable to marry, sometimes because of educational plans which apparently precluded marriage except at the price of great personal sacrifices. There were youths not in love but having sex relationships as an experience leading to maturity, and youths in love whose desire to marry was frustrated because of the community's insistence that one should not marry unless financially able to support a wife and family."

The same authority goes on to say: "Later study made by a student of a special group of twenty cases . . . showed an interesting variation in the education and occupation of the fathers. Out of the twenty, four were college graduates and two others had more than a year of college work. It is perhaps significant that only in three other records was the education of the father mentioned. This may or may not reveal an inherent intellectual snobbery among social workers. One hesitates to draw conclusions from so small a number, but this high percentage of college men in a group selected because they had accepted a casework relationship raises the question—does a higher standard of education make for clearer increase of responsibility for the child?

"Only four of the twenty were married, so far as the mothers or workers knew. Ten men were of foreign nationality, which raises an interesting question: what was there in the foreign cultural pattern that accounted for so high a percentage of foreign born in a group of men who were ready to accept even a slight degree of responsibility? Has the

*Marsh, Marguerite, "Common Attitudes Toward the Unmarried Father." National Conference of Social Work, 1940.

American cultural pattern released men from such a sense of responsibility? Has our insistence on the woman's responsibility for the moral standards of the community had this particular result as one of its by-products?"

PATERNAL RESPONSIBILITIES

Until recently, the prevailing attitude toward the father was so dominated by the support element that other factors were obscured. Today, an awareness of the father as a person rather than just a means of support has caused us to place a different emphasis on procedures for work with him.

Agencies that have undertaken to offer social services to the fathers have found that, on the whole, the men have been most co-operative and that the contact has proved helpful and worth while in working out a plan for mother and child.

Generally, society is either protective or punitive toward the father of the child born out of wedlock; no in-between attitudes seem to be used except by workers in a few agencies. The fathers are usually regarded as having responsibility but no rights. A worker in a social agency must be free of moral judgments if she is to make any progress with the father. We must remember that if his first reaction is hostility toward the worker and society at large, that it is because of society's wish to have him support the child regardless of whether he gets any of the satisfactions associated with usual fatherhood. In many cases, he might wish to legitimize the relationship and might possibly favor marriage, but very often the mother's immature decisions prevent it. Perhaps the father is no more able to support the child than is the mother; should he bear the entire support of a child, a burden that may prevent his marrying someone he cares for later on? The punitive attitude expressed through legislation to enforce financial responsibility has created retaliatory devices used by the putative father. He may call in witnesses to cast doubt upon his parenthood by swearing they, too, had relations with the mother. If the father does not voluntarily acknowledge paternity or agree to support the child, legal procedures are futile. More desirable and lasting results are obtained through casework approach to the father than through court action.

If we could have paternity proceedings under the jurisdiction of a socialized court, particularly in cases where the parents are juveniles, we might come nearer to a satisfactory solution. If the father and mother could be enabled to establish paternity, this would be desirable

whether the child was adopted or whether his mother kept him; the child, then, would have his father's name and the worker would have information about the father for use in planning if the child should be adopted.

In adoption, it is quite as important to know the heredity of the father as it is to know the mother's. The adopting parents usually want accurate knowledge of the background of the father; and the child, as he grows up, will want to know about him and should be told as much as is known. If we were considering the child only, justice might require that paternity be established in each case. However, we are dealing with three individuals and our purpose is to make each one an effective personality with as little damage to his integrity as possible.

There is certainly a need to articulate and interpret the experience social workers have had in working with fathers, so that there will be a reduction in the community's attitudes of confusion and ambivalence. Any preventive measures against illegitimacy would necessarily, it seems, have to be based on such a reduction and ultimate change.

Insight gained through casework may eventually reverse the trend of illegitimate births and reach a goal Grace Abbott knew could only be reached by basic improvements in social and economic conditions and in our system of education and training. It should be part of every social worker's obligation to interpret the need for these improvements to the public before any noteworthy progress can be made.

"In the meantime it is the duty of the state to provide as far as possible equality of opportunity instead of making success in life more difficult for these children by legal handicaps."

Grace Abbott, from *The Child and the State*.

THE CHILD AND HIS NEEDS

Now what of the child? He is here, as material evidence of his parents' deviation from our cultural pattern. What are *his* needs?

First of all, he has needs which are tied up with his mother's early needs. He is in need of prenatal and post-natal care. Every child has a right to protection from unnecessary hazards at birth. Whether he receives such protection depends upon whether there are social and medical services available in the community, whether these are sufficiently financed by public or private funds to take care of unwed mothers, and whether the mother gets to the agency giving the services. The shifting of unmarried mothers' applications from agency to agency, which is

known to exist, only prolongs the day when the social cost must be met—at inflation prices.

The child's next great need is to have his mother and father and the social worker meet to discuss his future life. If his mother decides to keep him and his parents do not marry, then he is handicapped by the lack of normal home life. His mother probably must work to support herself and him. She may marry later, but chances are great that by this time the child will have experienced a succession of foster homes or institutions and his feelings of insecurity are mounting.

Aid to Dependent Children under the Social Security Act, by the definition of a dependent child, provides federal aid to the illegitimate child in its own home; but not all states take advantage of its provisions. The practice generally among states seems to be to give aid to the child and relief to the mother in an undesirable home but to consider that the unmarried mother from a good family with good background has committed an inexcusable act and is therefore not entitled to it.* We know, too, that Aid to Dependent Children in many states is inadequate and must be supplemented.

If the mother marries, hoping thus to solve her problems, the child is a constant reminder to the husband of the mother's earlier conduct. When she becomes aware of this, she may reject the child or she may become overly solicitous. Also, jealousies may arise between this child and her legitimate children.

If the child and the mother are living in a foster home and the mother is at work all day, division of responsibility and authority is difficult. The child is usually under abnormal pressure to "be good," and feelings of insecurity develop. Is it any wonder that another generation of bewildered, dependent, and emotionally deprived children reach adulthood with the same emotional handicaps as their forebears?

If the child is adopted, the question will arise about how much to tell him of his parents. The consensus of social workers seems to be that he should know as much as possible. If he feels information is being kept from him, in his insecurity he may resort to phantasy about his own parents and about the adoptive parents until he becomes unable to face the reality of being an adopted child. If, however, sufficient security has been given him in the adoptive home, he can accept his position. Adopted parents should be ready to compensate for the security that own parents

*Labaree, Mary, "Unmarried Parenthood Under the Social Security Act." *National Conference of Social Work Proceedings*. 1939.

usually supply; more than own children, adopted children need this security.

BIRTH RECORDS

Much debate has occurred the last few years as to the value or disadvantage of removing the item relating to legitimacy from the birth record. The Children's Bureau has felt that it is desirable to keep this item on the record if the information is properly safeguarded. Definite value is seen in having available as accurate a picture as possible of the social status of every child, in a properly safeguarded state file, and also in having statistical data on birth out of wedlock that will assist in social planning for unmarried mothers and their children.

The major argument for elimination is that an entry of illegitimacy on the birth record stigmatizes the child. This argument fails to distinguish between the information recorded on the birth certificate and that made available in certifying facts from the birth records for various purposes.

Even when the item on legitimacy is omitted, a question as to the status of the child will be raised if the father's name is not given on the birth certificate. The same situation results when certificates of age for school entrance, work permits, and other purposes leave blank the spaces calling for the name of the father and mother as well as the name and date and place of birth of the child.

Beginning with 1920, California and Massachusetts have omitted the item on legitimacy from their birth-record forms. Following them, five other states have been authorized to omit this item: 1. New York in 1936 and Utah in 1939 by statutory provision; 2. Maryland, Nebraska, and New Hampshire by ruling of their state departments or boards of health. Texas laws of 1937 also authorized omission of the item, but this provision was repealed in 1939.

Massachusetts and New York are the only states in this group that have recognized that the mere omission of this item from the birth certificate does not really protect the child. New York has made special provisions for safeguarding all birth records; it issues certified copies only to the persons immediately concerned or to their representative or on court order, and all certificates of age issued for general purposes include only the name of the child and the place and date of his birth. Massachusetts, after many years of experience with the lack of safeguards provided by the omission of the legitimacy item, now requires that records of children of illegitimate birth may only be examined by, or certified copies issued to, a person requesting information about his

own birth, or his parents or representatives, or a person whose official business entitles him to this information, or on court order.

The importance of keeping from public inspection the records of children born out of wedlock has been recognized also by nine other states,* which provide that transcripts of birth records shall not be issued except upon the request of the parent or child or upon court order. Several of these states further provide that the records of this particular group of children shall be kept in a separate file.

The Bureau of the Census has been engaged for some time on a revision of the proposed Uniform Vital Statistics Act. Under the provisions of this proposed uniform birth-registration law, the birth records of the state are to include accurate information in regard to each child, including his social status, but such records are not to be available for public inspection. The Act further provides that the content of certified information from official state records shall be limited to those items which are of particular value to the person requesting such information, and that no data shall be issued from the state records unless the purpose for which they are to be used is fully understood. Under this plan, certificates required for school attendance or work permits will give only the name of the child and the date and place of his birth.

Enactment of laws in all states providing safeguards for all birth records, such as are required by the New York law and by the proposed Uniform Vital Statistics Act, would result in complete protection of birth records of children born out of wedlock and would obviate the need of special clauses for these children.

*Kansas, Michigan, Minnesota, North Dakota, Oregon, Pennsylvania, Texas, Virginia, and Wisconsin.

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PART SEVEN: *Need For Special Services*

21

THE EXCEPTIONAL CHILD

The normal child is generally considered to have the ability to adapt himself to average patterns of behavior in the community and to conform to what is average, in physical and mental characteristics, for the mass of population. If a child possesses less or more of the abilities necessary for this self-maintenance, he is exceptional and needs to have provision made so he may develop his potentialities as fully as possible for leading a normal life.

In the past century, there has come to be general recognition that the exceptional child needs specialized training. We have now entered a further stage in our movement toward better care for these people by realizing that the blind child, the deaf child, the feeble-minded or gifted, the epileptic or crippled, is first of all a child with a personality of his own, belonging to a particular family, living in a designated neighborhood. The fact that the child deviates from the general concept of a normal child does not mean that he can be grouped as identical with all other blind children, or gifted children, and so on, and that treatment should be identical for his entire group.

We now recognize that merely treating these children with kindness is not sufficient. If it is positively determined that neither the home nor the local school can provide the supplementary training that will enable exceptional children to attain their utmost in development, then it is the responsibility of the State to supply suitable opportunities for training and instruction.

Among those included in any discussion of exceptional children are the feeble-minded, the gifted, the psychoneurotic, those having speech defects, the delinquent, the blind, the deaf and the epileptic. Some require special methods of care and training for a temporary period only. In this chapter, we will discuss those not mentioned elsewhere who, we believe, will more or less permanently deviate from the average or typical.

There are sharply divergent opinions as to the extent of this problem. Grossman,* on the basis of extensive medical reports and special investi-

*Grossman, M. P. E., *The Exceptional Child*. Chas. Scribner's Sons. 1917. pp. 8-9.

gations, estimates only twenty-five per cent of all children of school age in the United States are perfectly healthy and normal. Arnold Gesell estimates the ratio of exceptional children in the total population of the United States would be about fifty per one thousand.*

Children differ in degree or amount, not in quality, of various traits. Contrary to popular belief, all children have the same kinds of traits and capacities, but exceptional children are more or less richly endowed than are normal children.

There is actually no sharp line of demarcation at any point. Our classifications and distinctions are made in order to facilitate our work but nature makes one group merge insensibly into the other. Each child that deviates from the normal is not uniformly deficient or uniformly gifted in all traits.

MENTALLY SUPERIOR CHILDREN

Our positive knowledge of the mental, physical and emotional traits of mentally superior children is extremely limited in comparison to the available knowledge of feeble-minded children. We were much slower to learn that the gifted child needs special attention than to recognize needs of other special groups. Gifted children, if they conformed to routine school procedures, were formerly not viewed as needing any special methods of training. The gifted child was referred to as a "bright child" but special thought was given him only when he presented a "problem." It was the problem, not the child, on which attention was centered.

If the mentally superior child drifted along in school at the pace set by the capacities of the "normal" child, his abilities were never challenged. He was duly promoted and perhaps "skipped" a grade now and then; he received excellent marks with little or no effort and developed habits of idleness, day-dreaming or indifference. If, on the other hand, he reacted against his boredom and effortless existence by trying active, and to him interesting, experiments, he was liable to be judged "emotionally unstable," "high strung," or "nervous." It was popularly supposed that such traits were inherent in intellectually superior children but this conception has been shown to be groundless. Scientific study has proved that gifted children are as emotionally stable as are normal children and may be superior in this respect; any apparent instability probably results from the way these children are handled at home or in school.

*Gesell, Arnold, *Exceptional Children in Public School Policy*. Yale University Press. New Haven, Conn. 1921. (Pamphlet).

When, in an effort to meet the needs of the mentally superior child, he was greatly accelerated in grade status so that he had interesting intellectual competition, he found himself unable to fit into the group socially or physically. A child nine years old, with average nine-year physical size and emotional maturity, has real problems in a class where the chronological ages of other children are twelve to fourteen. The gifted child may be vitally interested in class parties, games and sports and engage in them as far as possible, but his interest and participation with others in the class are checked by age, immaturity, and tradition.

He may try to solve his problems by turning for companionship to children of his own chronological age but he enjoys more complicated and highly competitive games than they do. He is also more able to engage in long-sustained, complicated games which lead to remote goals. His vocabulary is developed beyond theirs. He thus often finds it difficult to locate other children of his own age with whom he is congenial and therefore may be labeled as a child who cannot "get along" with other children.

Since he cannot wholly participate in physical activities of older classmates, his play tends to become sedentary and he may invent solitary games, compile lists, make collections, draw elaborate designs, develop laborious mathematical calculations. He may develop particular skill in sports which do not depend upon group participation, such as swimming or skating.

The difficulties mentioned do not exhaust the list of problems created by the difference in mental power between the gifted child and the average child of his age. There are also conflicts within the superior child himself, produced by the combination of emotional immaturity and intellectual superiority.

Problems of home discipline arise when the child, young in years but mature in intelligence, has a parent of only average intelligence. Then the parent-child relationship may suffer. The child may lose respect for the parent's opinions, and the parent may resent the superior intelligence of the child and penalize him by rejection or by severe and unwarranted punishment.

It is difficult for mentally superior children to learn self-government and conformity to procedures unless they see sound reasons for required behavior. Unless intelligent adults recognize and make proper provision for them, their potentiality for competent leadership in our society is lessened. Unwise handling of the gifted child at home or in school is a

detriment to character formation and to satisfactory adjustment in adult life.

Comparatively few school systems in our smaller communities make adequate provision for the mentally superior child. Experimental education is trying to work out solutions. A moderate degree of acceleration combined with enriched curriculum is one method. In areas of large population, special classes formed entirely of gifted children are also used advantageously.

MENTALLY DEFICIENT CHILDREN

Mentally deficient is a broadly inclusive term used to refer to all individuals who develop some or all of their mental functions at a subnormal rate.

Many in this group have the capability of becoming useful adults if carefully supervised. The group as a whole, however, is usually the first to be affected by economic depression; the mentally defective workers are weeded out and more capable persons take their places.

There are various gradations of mental deficiency. George Stevenson has stated* that "the incidence of severe mental deficiency is about one per cent of our population, but social dependency because of inadequate mental processes amounts to about thirteen per cent. The one per cent of this number are seldom a problem as they are usually custodial cases cared for at home or in an institution. The twelve per cent remaining are ones who present problems. They are less apt to be recognized by the community as mentally deficient and are more apt to be in the delinquent group."

Feeble-mindedness is usually defined in state laws to include individuals with intelligence quotients of 50-75, as measured by the Stanford Revision of the Binet-Simon intelligence test. If no mention of I. Q. is made, however, a person with an I. Q. as high as 80-90 may be committed to state institutions for the feeble-minded.

The family with a non-delinquent feeble-minded child usually cares for that child without aid unless the presence of brothers or sisters creates an additional problem. But when a feeble-minded child becomes delinquent, his problem increases and becomes a community one, and is usually handled from that angle and agencies not primarily concerned with the feeble-minded are involved.

The history of special institutional care for the feeble-minded only

*Kurtz, Russell H. *Social Work Year Book*, 1943 ed. 7th issue, N. Y. Russell Sage Foundation. p. 329.

goes back to the beginning of the nineteenth century. In 1837, a center was founded by Seguin in Paris "for the training of idiots." Three years later, the first asylum for idiots opened in England. In 1866-67, the Germans started two schools for mental defectives at Halle and Dresden.

In the United States, the first institution for feeble-minded was opened in Massachusetts in 1848 as an experimental school. J. B. Richards, "an able instructor," there was sent to study Seguin's methods and upon his return adapted them to the Massachusetts school. Three years later, the state made an additional appropriation for this institution which then became known as the "Massachusetts School for Idiots and Feeble-minded Youth."

Institutional care is now widely spread throughout the United States and the waiting lists of institutions have been growing longer. Within the past ten years, however, there has been also a definite increase in a "Family Care" movement. That is provision for the care of feeble-minded in foster homes.

The increased use of foster homes, as well as of institutions, for the mentally deficient has resulted from the fact that people now understand the need for early recognition of the feeble-minded child and provision for his care. Not so well understood, however, are the considerations that should govern the place and type of care, whether in the parents' own home, in a foster home, or in an institution.

If there are adequate clinical facilities available and the parents are helped to understand the limitations of their mentally deficient child, the child often can be kept in his own home. The care of low-grade children in private boarding homes also has much to be said in its favor. However, one must take into account the difficulty of obtaining these homes for any grade of mental defectives, the intensive supervision required by them when obtained, and the increased cost per capita of this type of care.

The amount of supervision required of the foster parents and the amount of casework that the child-welfare worker can do will vary with the child's intellectual level. The efforts of the worker may be at first directed toward assisting the child to adapt himself to living with others. This type of care helps the child live a more normal life, educates the community to the fact that not all feeble-mindedness is confined to idiocy and imbecility, and relieves crowding in institutions.

If the child is a custodial—"low grade"—case, the parent or foster parent may need only advice regarding simple methods of handling and feeding of the child and occasional help in regard to his own emotional

adjustment to this situation. If the child is of higher intelligence, then both child and parent, or foster parent, may need a good deal of supervision in order to make an adjustment with the least emotional tension. The parent may expect too much of the child and will have to learn that a mentally deficient child may not react normally to average situations.

When a mentally deficient child is sent to an institution, it is usually because of the failure of his home and community in training him, so it is wise to think not only of the individual while he is in the institution but of the adjustment to be made later in his community. Those feeble-minded who are material for eventual home or vocational placement should have training that is not beyond their native intelligence or they may develop emotional instability in addition to their feeble-mindedness.

While help for one high-grade feeble-minded child may consist in placing him in an institution or supervising his care in his own or a boarding home, assistance for another may only require the arranging of better educational facilities for him within the scope of his intelligence and abilities. The largest number of mental deviates are in the dull-normal group, and therefore the problem is essentially one of education. Teachers for this purpose must be specially trained to give a pupil the maximum of information he can assimilate and the skills for simple interrelationships of living that a normal child learns without specific direction.

MORE SPECIAL SCHOOLS AND CLASSES NEEDED

At a time when our schools are overcrowded and understaffed, it is practically impossible to work out in each classroom the special, individual instruction needed for the mentally deficient. Special schools or classes seem to meet the need much better. They should offer a diversified program of work, for mentally deficient children vary in interests, skills, and potentialities as do normal children. The work should be so planned that each child will have a chance to feel the satisfaction of accomplishment.

Federal and state subsidies for special classes should be available to stimulate provision for education for this group. At present, cities and large towns have clinics and special classes in the public schools for mentally defective pupils, but similar pupils in rural districts are usually neglected as to treatment, education, and training.

Permanent segregation of all feeble-minded is occasionally demanded by non-students of the problem. If high-grade feeble-minded were segregated, so many workers would be eliminated from routine jobs as to

play havoc with our industrial and economic system. The high-grade moron fills a vital place in the working world and, except eugenically, is no menace to the community. Contrary to most popular conceptions, he makes up only a relatively small percentage of our criminal class. Of course, for the protection of the community and the child, segregation is necessary for the feeble-minded delinquent. But on the whole, our best plan seems to call for custodial care for the feeble-minded who cannot look after their simple wants; segregation for those who have given evidence of their inability to adjust under supervision in a community; and help to those who seem able to adjust.

There is one group of high-grade mentally deficient who must be permanently segregated. These are the trouble-makers, who, because of their complete instability and inability to adjust emotionally in any community, can never be placed industrially. They can be successfully handled only in an institution, and there only by a staff with particular training and understanding of their ways. Under supervision by such a staff who realize that they are mentally inadequate rather than wilfully disobedient, these children can find physical and emotional security. They can do many helpful things necessary for the institution's upkeep.

For this high-grade group in the institution, there should be recreational facilities and a person trained to give leadership and supervision. The children should be taught trades or skills in which they can become proficient and, although they need permanent institutionalization because of instability, they can use their skills in creating articles for sale to the community on a pay basis.

For other high-grade mental deficient, there are many advantages in the "colony" system, as demonstrated by the Rome, New York, State School. This school has established in outlying communities, groups of cottages containing small numbers of mentally deficient persons under close supervision. These persons, chosen on the basis of their apparent potential abilities to become self-supporting, are permitted to go out to work by the day in factories and other places of employment and, as far as their capacities justify, to draw their own wages, and select and buy things in stores.

This experience is in effect a continuation school in industrial and vocational training and in social and economic efficiency. Its fundamental object is to fit young people for a life of socially acceptable self-support in a limited environment.

If the mentally deficient succeed in colony life, the institution by its training has given them greater freedom, relative mental health and

happiness and has thus made their continuing segregation less irksome. If the colony training helps them to succeed to such an extent that they seem likely to be socially adequate, they may be paroled to self-support under supervision.

PAROLE FOR MENTALLY DEFICIENT CHILD

Periods of parole will serve to determine the feasibility of non-institutional care under supervision. Parole periods should be divided into phases: a short vacation of approximately four weeks and, if this is successful, a long vacation of a year or more. Parole should not be practiced unless careful and complete supervision can be given.

The community and the state have not discharged their obligations merely by training for return to the community. Competent continuing supervision must be provided, because only by guiding and directing the feeble-minded person, usually throughout life, can the training be made effective.

Moreover, no ward should be paroled until careful consideration has been given to the conditions in the home to which he would return. In many cases, the painstaking effort of institution and colony training that has made the child happy and moderately capable of self-direction is entirely negated by returning the child to a low-grade or unsuitable environment in which successful adjustment is impossible. Every effort should be made to avoid placement in situations similar to that in which the individual has failed before.

OUTLOOK FOR MENTALLY DEFICIENT CHILD

The New Jersey Department of Institutions and Agencies during recent years has undertaken a new program, which has so far met with a high degree of success. The state's institutions are so crowded that the responsibility for care of mental defectives very often cannot be lifted from the parents. To lighten the burden, a statewide program is under way to train parents in better methods of care for mentally deficient children in their own homes. For the child, a regime is established that is similar to the techniques successfully employed in institutions.

Although this project is still in the beginning stages, it is pointing the way to the establishment of other community programs placing increased emphasis on supervised home care in caring for the feeble-minded. One of the effects of this has been to bring together several mothers of mentally deficient children who have established informal centers where, in turn, one mother will care for several children so that the others can

have the time they need for shopping, recreation, etc. This type of development should encourage the establishment of care centers for the handicapped under proper agency auspices.

Further consideration should be given also to foster home care, which has a definite place in planning for the defective child.

As to the role of the public school in establishing special classes for mental defectives, some states have recognized the need and written provisions for this into school laws. Teacher's colleges have offered instruction to qualify those teachers who will deal with subnormal students.

Hartford, Connecticut, has a program for supervision and follow-up of mentally retarded minors, with I. Q. 45 to 75, who have been attending the public schools. All such pupils, before they reach age sixteen, are referred by the Board of Education to the Hartford Social Adjustment Commission, an agency financed by municipal funds.

The duty of the Commission is to follow and supervise such minors, in the home, in the community and in employment, from the time they leave school or become sixteen until they are twenty-one. Minors living in the community who have never attended the city's public schools can be referred through other social agencies.

This Commission had its beginning in 1933 and was officially incorporated into the Hartford municipal organization in 1937. An administrative body of six commissioners appointed by the mayor, not more than three of whom can be of the same political party, determines the agency's policy. The Commission staff is composed of a director and two case-workers.

The aim of the Commission is to help clients to become both socially and economically well-adjusted members of society. Much interpretive work is done with families to help them plan for the client in terms of his limitations, abilities, capacity and achievement. Clients are helped individually or with their families in planning for recreational and leisure time and they can bring any disturbing problems to the agency for assistance.

Economic adjustment necessitates, where possible, permanent, regular employment in a job geared to the client's intellectual and social intelligence. Many mentally retarded minors prove to be excellent workers in jobs specifically suited to their abilities. The Commission staff studies the case of each minor individually and arranges for suitable job placement when employment seems advisable. Each job placement is followed up regularly by the Commission's staff workers and clients bring employment problems to the agency for help.

Only about five per cent of the Commission clients in this group of 45-75 I. Q. have been found to be unemployable. In such cases, or where the benefits of employment are found to be negligible, plans are made for supervision in the home and community or for institutional care.

The child-welfare worker must keep abreast of developments and current theories in this rapidly evolving field of work and balance them against her knowledge of children's needs. She should not lose sight of the fact that the high-grade defective is best off in his home community—if that can provide for his training—because of the emotional security his own home offers him. When a decision is to be made on the institutionalizing of a child, the parents' wishes should be given weight, if the parents are competent to make this decision, and institutionalization should be used only as a last resort in view of its lack of emotional satisfactions for the high-grade defective child.

The worker will also have to interpret the limitations of the child to the school he attends, and to recreational leaders. It is difficult sometimes to realize the limitations of the high-grade defective, and the demands of uninformed teachers and others would lead him to attempt more than he can possibly carry out successfully.

THE PSYCHONEUROTIC CHILD

Psychoneurotic is only another way of classifying children who have formerly been designated as nervous, peculiar, queer, emotionally unstable, odd, erratic.

This category includes a variety of emotional disturbances which may be manifested by either the aggressive or withdrawing behavior seen in children who are always "out of step," or constantly in trouble with other children or adults, or striving to be always the center of attention, or constantly silent and inaccessible, or preoccupied with their health, etc. These symptoms may be accompanied by others, such as speech defects, sleeplessness, or other difficulties for which physical examination or intelligence test does not yield any adequate explanation.

If the symptoms do not yield easily to simple ordinary methods but seem imbedded in the child's entire personality structure and interpersonal relationships with his parents, particularly the mother, psychiatric consultation and treatment should be sought. Readjustment is apt to be a long process and to involve work with both child and parent.

DEAF AND HARD-OF-HEARING CHILD

Before we can understand the whole problem of deafness and hearing

loss, particularly in relation to a program of prevention and treatment, we must know some of the types and causes of hearing defects.

The deaf person is totally lacking in ability to hear; but the hard of hearing is able to hear to some extent, the amount of hearing varying greatly with different persons.

There are two kinds of deafness: congenital, which is the result of either the development of an imperfect embryo or transmission of hereditary tendencies leading to deafness, and acquired deafness, which occurs after birth as a result of disease or injury. It is not easy to know, in the case of a baby, whether he was really born deaf or became so in the first few months, since it is difficult to determine whether or not an infant hears a sound.

Deaf-mutism has been a term used throughout the ages to include every form of deafness coupled with the absence of speech. The word has often given the erroneous impression that mutism is a simultaneous occurrence—that a person born deaf is also born with vocal chords that don't function. But congenital deafness and congenital mutism are rare. If a deaf person is unable to speak, it is only because he was unable to hear sound and thus could not imitate sounds to produce speech. The words "mutism" and "dumb" should be discarded, for they are but an added stigma.

According to a survey made in 1932 by the American Society for the Hard of Hearing, there were in the United States approximately 3,000,000 hard of hearing among children of school age. The 1930 White House Conference estimated 17,000 totally deaf children.

Attitudes toward the deaf and hard of hearing have gradually improved, but even today there is much misunderstanding. In very early times, people destroyed the deaf as well as the blind, or kept them locked up as they did the mentally ill. In fact, they were considered mentally ill. A deaf person was held a disgrace to his family. Later, the deaf were treated somewhat better but still harshly. In respect to laws, the deaf often had no more rights than infants or insane. Under Roman law, people born deaf could have no civil rights. In Hindu law, the deaf were unable to inherit worldly goods. Naturally, in early times there was little or no attempt to educate deaf children, since it was believed they would never be able to carry out the duties of citizenship.

EMOTIONAL EFFECT OF DEAFNESS ON CHILD

Even today, our laws reflect old attitudes toward the deaf. In law books, there may be nothing on their legal status or else they may be

grouped with the insane. If a person charged with a crime is found to be deaf, he is at once presumed to lack a sound mind and he goes through the same test as that for an insanity plea. In New York, civil service regulations classify the deaf with the seriously handicapped and the insane, as people to be barred from examinations. Since they do not hear, they misinterpret things and people infer they are mentally unsound. The characteristic attitude, then, is one of coldness and indifference.

Knowing they are set apart, considered different, and not members of many activities, they tend to associate with others who are also deaf. There is a great strain on their nervous system and their eyes, for they have to use their other senses more, especially that of sight. They are often sensitive to certain sounds through vibration and so many enjoy dancing for this reason.

The hard of hearing, also, suffer from misunderstanding. It is often thought they could hear better if they tried harder, but that is not so. Most of them exert much greater effort than the normally hearing person. They meet many embarrassing situations in trying to make themselves understood. It is no wonder they have an inferiority feeling.

In considering the emotional effects of deafness, it is important to know when and how the deafness occurred. If congenital or acquired very early, the effects would be different from those if acquired later in life. The reactions to acquired deafness depend too upon the personality before deafness.

Since even total deafness as well as partial deafness is difficult to recognize in a very young child, parents may believe the child to be stupid. Even if the deafness is recognized, parents may take a hostile feeling toward the child. Although these feelings may be unconscious, the child senses them and feels rejected. Since the whole learning process is so much more complicated for the deaf child, it becomes a frightening experience. Thus there may be an emotional blocking toward it.

Joseph C. Solomon of Mt. Zion Hospital, San Francisco, California* states that this feeling of bodily impairment may be so distasteful that the child will tend to repress his feelings about it. This may show itself in deceitfulness. Since the child feels isolated, he builds phantasies of himself. Thus he is more likely to suffer emotional disturbances. As he grows older, he may believe that only the hearing are happy and therefore feel depressed and inclined to isolate himself from social contacts. The deaf are usually quite suspicious. Doctor Solomon says the hearing

*Solomon, Joseph C., M. D. "Psychiatric Implications of Deafness," *Mental Hygiene*, XXVII, No. 3. July 1943. pp. 439-443.

person knows that most of what is said around him isn't worth hearing anyhow, but the deaf person always thinks he is missing something.

Until the last few years, little attention was paid to the hard of hearing as a special group. In fact, until recently, they were grouped with the deaf. But they are different from the deaf, both as to their defect and their educational needs. In a study of the intelligence, achievement, and personality of hard of hearing at Columbia University in 1931, it was found there is no relation between auditory loss and intelligence; hard of hearing should be educated with the normal rather than the deaf; intelligence of the hard of hearing is of the same quality as that of the normal; and hard of hearing do not have a language handicap as do the deaf. Whereas the deaf do not hear and respond intelligently to spoken language, the hard of hearing retain actual hearing and can respond intelligently to language, as long as the sound is near enough.

One of the greatest problems in dealing with defective hearing among children remains that of detection. Detection in a very young child is still most difficult, although easier than in the past. A child is usually not said to be deaf before the age of two, for it is not until he reaches the age at which he should be responding normally to speech, but does not, that one can be sure he is deaf.

The American Society for the Hard of Hearing, founded in 1919, stimulated research for methods of testing the hearing of large groups. The result was the group audiometer. Through this technique, people began for the first time to realize the large problem that existed concerning hearing deficiencies in school children.

It is important that a thorough testing program be carried out in order to detect all those with even a slight hearing loss. In this way not only could much remedial work be done, but much could be saved in the way of expense to the schools and society in general.

In a conservation program for the hard of hearing, teachers, nurses, and parents each have a part. Certain types of behavior of a child may be indicative of a hearing loss. Such behavior might be continuous inattention, bewildered expression when directions are given, habitual turning of the head to bring the better ear nearer the speaker, incorrect pronunciation of common words, excessive restlessness, or withdrawal from the group. If moisture is noticed from the ear canal or if the child complains of pain or noises in his ear, he should be examined. All children returning to school after having had any contagious diseases should have hearing tests immediately and at frequent intervals thereafter for the next few years.

PREVENTIVE MEASURES NEEDED

Much could be done by way of prevention. A health program is all-important, because many illnesses of children have serious effects on the ears. Earlier attention should be given to ears, nose, sinuses, and throat during acute childhood illnesses. There should be early removal of infected tonsils and adenoids. Francis L. Rogers* believes that to prevent hearing disorders there needs to be a general and special health education for parents through child-welfare agencies, together with general home sanitation for improved health.

Parents and teachers should also do something about the under-nourished child, the child with frequent colds or defective teeth, the mouth breather, the child who complains of his ears being "closed up," or of having head noises. Particular emphasis should be put on careful observation of after-effects of diseases.

Besides this program of prevention and detection, much can be done for the child who already has a hearing loss. This will include medical, emotional, and educational care. By early medical treatment, the progress of the loss may be arrested and the impairment corrected. Much can be done in the school to help the hard-of-hearing child make a sound emotional adjustment. Since he is usually shy and withdrawn, he must be emboldened to take part in school activities: clubs, games on the playground, and in recitation. He should not be made to feel that he is different, but encouraged to accept his handicap and develop compensations. His fears would be eased a lot if special effort were made to see that he understood all directions.

Parents' attitudes will often determine the feelings of the child and, if parents are sensitive about his lack of hearing, he will be sensitive too. Parents need to bolster him to do all things that other children do so he will gain self-confidence. A child in his social development has difficulty enough without finding he has been set apart as queer and different. The normal tendency of parents is to give a handicapped child attention; this may spoil him if not directed toward helping him carry on normally.

Educating the deaf is obviously quite a different problem from educating the hard of hearing. For, while the latter usually have been able to hear enough to have acquired speech, the deaf may not have a memory pattern of words already heard and so must learn speech and language by another method.

*Rogers, Francis L., M. D. "Deafness—A Vital Social, Economic and Medical Problem," *California and Western Medicine*, XXXV, No. 2. 1931. p. 4.

With the rise in population and the accompanying increase of deaf children, particularly in the larger cities, day schools for deaf have been provided as a part of regular public school systems. These seem to be better than special boarding schools for the deaf because they keep the handicapped children in a natural environment of own home and public school and do not stigmatize them as utterly different.

The National Research Council, in the second conference on Problems of Deaf and Hard of Hearing, in 1929, and the White House Conference on Child Health and Protection, in 1930, both urged research in the field of education of the deaf and hard of hearing. They believe this should include surveys of teaching personnel, of teacher-training courses, and of laws concerning hearing tests; development of adequate tests for educational and psychological examination of this group; studies of curricula, of personality and vocational problems; surveys of the cost of conservation programs; and medical research.

The child-welfare worker is in a position to locate and refer for treatment those children who are deaf or hard of hearing. She also helps disseminate knowledge that will provide understanding of the type of problem that exists and the need for legislation.

BLINDNESS AND DEFECTIVE VISION

"The term *blindness* is a most general one designating any distinct lack of power to respond to the stimuli which give rise to vision. It may be partial or total, and may be due to injuries or deficiencies in any part of the optical mechanism, accessory to the retina, in the retina itself, in the optic nerve, in the cortical or subcortical centers of vision or in the connections between these—Other definitions are 'vision from about 1/3 to 1/10 of normal with the best glasses obtainable' or 'sight worse than 3/60' and 'the inability to count fingers at one foot.'"^{*} The White House Conference of 1930 defined a blind child as "one who cannot use his eyes for education."

In partially seeing children, three divisions are usually made for special educational purposes: 1. children having a visual acuity between 20/70 and 20/200 in the better eye after all medical and optical help has been provided; 2. children with serious, progressive eye difficulties; 3. children suffering from diseases of the eye or diseases of the body that seriously affect vision.

^{*}Merry, R. V., *Problems in the Education of Visually Handicapped Children*. Cambridge. Harvard University Press. Boston, Mass. 1933.

The process of locating children with defective vision varies. They may be found early by doctors making routine physical checkups for alert, methodical parents; or perhaps not until they are examined upon entering school. Danger signs to watch for in children, as adults, are inflammation in or about the eyes, abnormal growths, opacities, headaches or pain in seeing, flashes or spots before the eyes, near or far-sightedness, the viewing of objects from odd angles, as well as optical defects obvious in structure and appearance of the eye.

Special sight-saving classes have accomplished much in recent years. Placement in these classes depends pretty much on resources available in the community, the ophthalmologist's report and recommendation (there is not complete professional agreement as to the treatment of all defects) and, if possible, a psychologist's report as to the personality needs of the child.

Parental consent is imperative in placing children in special classes and, if possible, the parents should be invited to visit the schoolroom in which such classes are conducted so that they can see that their child is not being discriminated against by reason of his defect, but that he is getting special educational facilities; the reaction of the parent will in turn influence the pupil's attitude toward his position in a special class.

There arise many problems of administration in program planning, especially for the small and rural communities. In some states, however, special arrangements of one kind and another have been made for the partially seeing children in such communities. Sometimes, the partially seeing child has special educational facilities at his disposal in his own rural school; or there may be a class for various types of handicapped children, where they can be helped. Special classes for the partially seeing may be incorporated in consolidated schools where it is common to find better facilities and advantages for children than in small, one-room, general schools. In some communities, special classes have been established in connection with the practice schools of teachers' colleges. Placement of partially seeing children in special classes in the nearest city has also been used.

Wherever the child goes to school, he must not be made to be fearful of the reaction of others to his defect nor should he feel that his handicap is an extra burden on his family—either social or financial.

The teacher of the partially seeing must be aware of the influences affecting the child from within and without. Often a defense mechanism has been built up within the child as an excuse for inability to accomplish certain aims. The teacher must be able to point this out as a faulty

excuse and direct the child to overcoming his inferiority. She must be able to consider the personality of the child in relation to his handicap. Some states train teachers especially for the partially seeing classes. In others, a school may select the most likely person from their staff and prepare her specially for the task of teaching the sight-saving class.

In most sight-saving classes in regular public schools, the child attends the special class only for study and preparation of the assignments but goes into the regular classes for recitation and class participation.

One of the most important functions of a teacher in a special class of this sort is vocational guidance; this cannot be separated from educational guidance since the final goal of most educational programs is the preparation of the child for work. Guidance in a sight-saving class is determined by special problems presented by the kinds of children in the class; therefore the teacher must be extremely discerning.

There seem to have been no surveys of exceptional children in the United States since 1938-40. This survey reports the number of blind or partially seeing in sight-saving classes in the country, with only one hundred eighty-one cities reporting, as follows:

Year	Number Reported
1927	4,465
1932	5,308
1936	7,251
1940	8,875

Of the 8,875 reported in 1940, those enrolled in elementary classes totalled 7,255 and those in secondary education, 1,557. Home institutions and hospital institutions accounted for only sixty-three. There were fifty public and private residential schools recorded, with nine hundred thirty-nine teachers, and in the one hundred eighty-one city school systems there were six hundred teachers.

The indication of future trends in sight conservation seems fairly clear. There is need for teachers specialized in the field. We are aware of the need for special education. It is hoped that "the school of the future" will be so constructed and equipped that it will have a maximum of well-controlled natural illumination.

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CHILDREN IN RURAL AREAS

The term "rural" as used in the United States Census includes all persons living on farms and in incorporated places having a population of less than 2,500. Places over 2,500 in population are counted as urban. This would thus include in the term "rural" mining towns, small factory towns, and suburbs.

The words "rural area" evoke a definite picture, but the details depend entirely upon the type of rural area. To one person, it may mean cornfields marching to the horizon; to another, stony hillside lots mean in yield and size; to some, a coal camp; and to others, the suburban area in which city workers have their homes. It is obvious that in four such regions local problems differ widely. However, we will use the term rural in a restricted sense, basing the classification on the type of social system in which the individual finds himself. This will exclude those people who live in rural districts but whose work and social connections are urban. In doing this, one discovers that the basis of rural life in its restricted sense is the farm family and the village that serves the family.

Villages of 2,500 or less in an agricultural area and the life of the farm family are inseparable since the villages are dependent upon the income from goods of which the farmer is the consumer, and the farmer is dependent upon the facilities of the village for marketing his produce.

Everything distinctive in American rural life, as contrasted with the life of the cities, is in some way a product of the family-farm organization. If the occupation of agriculture were generally carried on under a factory system, the problems would be but slightly differentiated phases of the social and industrial problems which characterize urban life. One can see this trend now in the large corporation farms in different parts of the United States.

The personalities of the villages are as varied as the personalities of the people who live in them. The geography of the area determines to some extent the nature of the economy (rural Arizona and rural Vermont present widely different pictures) and that economy may to a large extent influence culture.

Culture is said to include man's heritage of material goods, his in-

tellectual knowledge, his system of moral, spiritual and economic values, his social organization, and his language.*

The complexity and multiplicity of factors—historical, regional, economic, degree of isolation from urban centers—make generalization a hazardous task. However, certain characteristics differentiate them from the urban centers.

The rural village is a compact and relatively simple unit. The physical distance from the homes of the well-to-do citizens of the town to the shacks "across the tracks" is comparatively short. The banker's wife will patronize the same grocery store from which the wife of the section hand on the railroad buys the food her family eats. The son of the town's leading doctor goes to high school with the son of his mother's laundress. This does not necessarily mean that the social distance of the people from one another may not be great; but it does mean that they see and know one another in a manner not found in the city with its more numerous subdivisions of schools, shopping districts, and residential areas.

Rural people listen to the same radio programs, read the same magazines, and see the same movies, if a bit later, as do their city brethren. Along the business streets of the villages, are branches of the well-known chain stores of the city; the goods on the shelves display the same standard brands; the corner drug store sells the cigarettes you smoke and the gas station handles your favorite gasoline. All this is familiar to the city dweller. Wherein does the difference lie?

The difference can be illustrated thus: the gas station is not just the filling station with the familiar red, white, and blue sign. It is Don Dawson's station. Don walks into the drugstore for a package of cigarettes and Ed Anderson, with whom he has gone to grade school and high school, says, "Say, Don, Ethel called up and wants you to bring home a bottle of this new mosquito repellant. Figured you must be going up on the Gunnison fishing this Sunday. How are the fish biting now?" In other words, the townspeople know one another; they know the habits of one another.

The area may be one of those in the United States in which various groups are isolated from general community life—where social patterns, rigid traditions, and customs influence the culture of the people holding them as a unit even in the midst of others.

Groups like the Acadians—more commonly known as "Cagens"—of

*Malinowski, Bronislaw. "Culture." *Encyclopaedia of the Social Sciences*, Pt. IV. p. 621.

southwest Louisiana, a homogeneous people of French descent, resolutely resist the cultural influences of surrounding groups. The German-Russian groups of several middle western states have retained old customs and have fairly successfully repelled outside influence. The Navajo Indians of the southwest have also tended to perpetuate their own social heritage.

Not only these groups who are held together by language, race, or nationality present distinct cultural patterns; but in certain sections there is inflexibility of religious belief and a community moralistic attitude and prejudice toward the ne'er-do-well, the unmarried mother, the child born out of wedlock, or the alcoholic. For example, Elva M. might come to the child-welfare worker for help. The worker sees her as an insecure and emotionally immature youngster from a deprived home, who is going to have a baby out of wedlock. The attitudes of the people in the area may range from an apathetic attitude to outright hostility toward Elva and her problem. They see her as that wild M. girl, old F. M.'s oldest. Everybody knows old F. M. is a no-account loafer who hasn't done a lick of work for years. Didn't Elva's mother run away with a ranch hand? Wasn't her grandma a little wild before that? Sure, what can you expect? Runs in the family.

It would be unfair to imply that attitudes in the rural areas are unsympathetic. They vary from place to place with the rigidity of the mores. People are closely concerned with the troubles and triumphs of one another. When death occurs, there is a genuine sympathetic response of neighbors to the bereaved family. When Ted wins a scholarship to the state university, the village weekly paper gives him a write-up and the whole community is proud of its product. In certain situations, the overwhelming response of the countryside may occasion the use of diplomacy of the highest order on the part of the child-welfare worker in the selection and rejection of suggestions and offers to help.

The disparity between farm income and the cost of living, the great effort required to wrest a living from submarginal land or from a farm of uneconomic size present not only problems due to an unbalanced agricultural economy but may also produce personality problems engendered by the struggle for survival. This definitely affects the attitude as to whom and under what circumstance financial assistance should be given. Frugality, thrift, and moral standards are apt to enter into the decision.

In these rural areas mentioned, live fifty-one per cent of the children under sixteen years in continental United States, according to the final report of the 1940 White House Conference on Children in a Democracy.

This majority of children living in rural areas have far less than a majority of the resources of the nation for their needs in health, education, recreation, and adequate housing.

The most striking characteristic of family-farm life is without doubt the closely knit organization of the family. Two forces are responsible for the high degree of solidarity which exists. In the first place, there is the factor of physical isolation. Because there are fewer opportunities on the farm for contacts with the outside world than is the case elsewhere, the individual members must depend upon the remainder of the family group very largely for their social life. In the second place, the nature of the occupation is such that all members must spend a considerable part of their working hours together. The family farm is really a family undertaking, and the farm father is the head of the family in a more real sense than are many fathers who are in other occupations.

Farm-family solidarity is frequently exhibited over a larger group than that made up simply of the parents and the children. The grandparents on one side or the other may exert considerable influence in the determination of family procedures. Farm parents are forever faced by work to be done. This may be one reason that child labor seems to be tied up with the family farm. When parents think of child labor, it may seem to be a natural part of their life. Many who see no justification for child labor in industry, see nothing but good to be derived from child labor on farms, giving reasons as the benefit of fresh air and the wholesome contact with parents.

A fairly high proportion of men on farms in America never seriously considered entering any other occupation. They did not choose, but simply proceeded through their childhood apprenticeship until in the natural course of events they became farmers. Another group is made up of those who at one time or another really desired and possibly planned to enter some other occupation, but who remained on the farm because they were needed and the force of circumstances seemed to prevent them from realizing other ambitions. The smallest group is that which chose the occupation of farming rather than some other which they might have taken on equal terms. Women are more apt to leave the farm and go to the city to find a job. Consequently there is a higher percentage of men than women on the farms.

The farm girl realizes that when she remains on the farm and becomes a farm wife she will not lead a life of luxury. She will pay her way as a member of a working unit. Choice of wife or husband is limited in regions of relatively high degree of physical isolation, or often through

the manipulation by parents. The acquisition of a daughter-in-law who will make a good farm wife—or a son-in-law who will add one more worker to the farm labor force—is usually given careful consideration by parents. The farmer's wife shares the family occupation with her husband. In the urban family, the woman shifts more of the housekeeping to outside establishments such as bakeries, laundries, and food shops. It is a traditional ideal that many household tasks remain in the farm home even in the case of farm families who could well afford to have work done outside the home.

The age of marriage in rural life is younger than that in urban areas and the rural birth rate is higher than the urban. The urban population may consider children a luxury and sacrifice their desire for children in an economic and social struggle for success. The arrival of children in the farm family does not tend to interfere so much with farm life. There is, however, a woeful lack of good maternity care in rural areas. Medical care and hospital services have lagged far behind programs in urban areas. In many cases, farmers are not aware of what services can be given to them and their families by hospitals, clinics, and medical skill. Because of this lack of knowledge, they have not demanded adequate health services.

Distance from a local doctor's office and lack of money to pay for care are two principal reasons why treatment of children's illnesses is often delayed until it is too late. In many rural areas, improperly balanced diets, due to inability to secure proper foods, result in malnutrition and vitamin deficiency among children.

The opportunity for help through the aid of a child-guidance clinic or a psychiatrist seldom exists in rural areas. Sometimes a mobile clinic may be available to a few sections of a state, but this is the unusual situation. If the rural area is close enough to an urban area where mental health facilities exist, a child may be taken to the clinic or hospital for diagnosis and treatment. This procedure is usually an attempt to care for a condition that might have been prevented if help had been available closer by.

Often farm housing is sub-standard. Although the house may be large enough so there is not undue crowding, sanitary facilities may be entirely lacking, and although much more work related to the home function is carried on in the farm house than in the urban home, the typical farm home is less adequately supplied with modern conveniences than is the average urban home. Although many farming communities now have available to them electricity, motorized equipment, and other modern

conveniences, it is far from universal that this is common to rural homes or within the purchasing power of many. Income is uncertain due to unexpected loss of crops or stock, fluctuating prices, and limited bargaining power.

EDUCATION

Perhaps one of the greatest differences between urban and rural communities is found in their educational facilities. Presumably the United States has one of the best educational systems in the world, but the 1940 census reported approximately 1,908,299 children from six to fifteen years of age not in school. It is estimated that most of these were children of migrants, farmers and some minority groups from the poorer rural areas. What were some of the reasons for this?

Distance is one factor. Hundreds of rural homes are far from paved roads or well-kept highways. Dirt roads are at times impassable because of snow or flood or mud. Washouts and blizzards may prevent communications and travel, thus causing children to miss school. In rural areas where schools are open only five or six months of a year, two weeks non-attendance becomes a serious loss.

In some sections, children of fourteen and fifteen have never been to school. They live beyond the three-mile limit of compulsory attendance and there may not have been money enough to establish a school for them to attend, even though one may have been recommended.

The structure of public school systems in rural and urban areas differs greatly. In many rural areas, finances are lacking to supply buildings, equipment, competent teachers, and a normal school term. State and federal aid should be provided to reduce the educational inequalities between rural and urban areas and, in rural areas, among communities.

Textbooks present a problem. Who is to pay for them when the state does not and the family cannot? Food and clothing are also problems to be considered in relation to school attendance in rural areas. Insufficient food at home for the child who walks several miles to school, and a cold lunch of unbuttered bread and "salt side" do not give a child "boundless energy and vitality" to expend in study or play.

It is absolutely necessary that a child have clothing adequate for comfort and similar in quality and design to clothing worn by the majority of children in the particular school area. A child so poorly clothed that he suffers from cold or rain or snow, or that he cannot keep his self-esteem because other children remark about the poor quality of his clothing, cannot be in a very receptive mood for education.

The increasing consolidation of small rural schools, has not done away entirely with the one-room schoolhouse. In some instances, consolidation has aggravated the problem of rural school attendance; many children are so far from the school they cannot reach it unless they travel by bus, and snow in side roads may prevent school bus travel during stormy days.

Rural schools are seldom able to make provision for the very young child or the older adolescent or for pupils with special abilities or disabilities.

Frequently teachers in rural schools are not much older than their oldest pupils and have had only high-school education or less; are completely inexperienced, and unfitted for dealing with a group of children of varying ages and abilities. It is apparent that a teacher is not capable of awakening or stimulating leadership or breadth of vision when her own training and experience do not go far beyond those of her pupils. The teacher who has better training and is more gifted is drawn to a school system that pays a better salary and provides better equipment for work than do the majority of rural schools.

Increases in school budgets would mean better educational opportunities for rural children.

RECREATION

The problem of rural recreation is not easy to solve. Rural families may feel that children do not need to be taught to play. Farm work is demanding. Due to seasonal needs for specific work schedules, parents and children expect to work long hours. Long hours mean that when, at last, the child does have leisure time, he is just too tired to enter into any form of activity that will call for physical exertion or mental alertness.

Although farm work provides for an abundance of physical exercise in the open air, observation seems to indicate that farm boys and girls do not develop symmetrically. It is therefore necessary to supplement the ordinary routines of farm life with recreational activities which will offset this deficiency. There are certain farm occupations which are deleterious to the health of rural youth—such as cotton picking, onion and sugar beet weeding, and other forms of seasonal agricultural labor which require a difficult and unnatural posture and demand almost the same degree of monotonous attention as that of simple machine labor of industry. Ofttimes, the rural youth lives in a sparsely populated, cut-off, or stranded village community. Many live on little, eroded farms, distant and isolated from normal human companionship and contacts

other than those afforded by the child's immediate family. Still others live in a tiny rural community that is slowly dying out—the factory has closed and the local trade has been transported to other areas.

If one family is the only representative of a particular race, creed, or color in a rural area this may isolate the children of this family from whatever limited opportunities exist.

The average farm boy does not receive much in the way of cash remuneration and consequently he lacks spending money. Many young persons living at home on the farm are family workers receiving no pay whatever. And yet, many of the simple, free outdoor amusements of earlier years are no longer in vogue. Home amusements are not as easy to plan as they once were. The average rural youth has more time on his hands than his parents had when they were the same age; and, today, he has but little choice other than to look outside of his home for fun. In certain sections of rural areas, solitary roadhouses or taverns are the only places where rural people may gather and mingle with others.

More rural leaders in recreation should be trained and funds from larger units of government should encourage a more extensive recreation program. Such activities as the 4-H Clubs and Future Farmers of America are of great value in providing activities for rural youth.

THE RURAL CHILD

The rural child lives in a neighborhood which may be abundant with animal life but where there are few people, particularly of his own age. He uses the animals about him for playmates and companionship because distance makes it difficult for him to find playmates outside of his own immediate family. This is one of the factors that must be given consideration by the worker in her relationship with the child. The limited contact with people gives the rural child little experience in knowing and understanding strangers. He will be sensitive to differences and be puzzled, curious, and perhaps frightened by them. His general lack of experience with strangers will make it hard for him to move quickly into new relationships. This often makes him appear awkward, shy, reserved, and surrounded by an intangible barrier. It may also cause him to appear less intelligent than he actually is.

The child-welfare worker may find herself, in turn, puzzled by this barrier and unable to penetrate it unless she has a pretty clear understanding of its cause.

Another important characteristic of rural life which is of special significance for the children is the relative immobility of the population. A

child most often grows to maturity in the same community where he was born. The community itself has a high degree of homogeneity in that its members do similar kinds of work, have approximately the same social values, moral standards, and religious beliefs. A child who, for whatever reason finds himself in conflict with the accepted mores of the community, will have limited opportunity to find acceptance and approval. It will not be easy for him to allow himself differences of opinion which are disapproved by the people with whom he is identified. If he finds himself in conflict with the standards of his immediate family, he will probably find that his family's opinions are supported by others in the community. Minor differences, however, may be more easily tolerated because he is not in constant contact with many people.

At home, the child experiences considerable freedom and acceptance. He is welcomed to the family group as an economic asset in a comparatively non-competitive society. There are simple as well as complex tasks to be performed on the farm, and the young, the slow, the dull, or the handicapped child can find a useful function there. This gives the child a sense of basic security in that he can feel wanted and useful.

THE RURAL CHILD-WELFARE WORKER

There are approximately five hundred rural counties in the United States in which child-welfare workers are now employed in public agencies to give services to children. Theoretically, there are no fundamental differences in either the preparation for, or the practice of, child-welfare work, whatever the area. Practically, however, there are some differences, many of which center in the personality of the worker practicing in rural areas. Much depends upon her ability to relate and adapt her professional training to the realities of a rural community.

The rural child-welfare worker will need the same definite background of information about the area and its resources that she would if she worked in an urban area. She will need to learn something of the occupation of farming as she would of any of the industries operating in the region where she works. She may find that the difference between this occupation and others is primarily that the farm is a family enterprise. She need not have the knowledge of an expert in agriculture, but she should have an understanding of the people who farm and of those who live in rural villages.

She should know the rural school program. A good working relationship with the teaching staff is of inestimable advantage to her. She should know the extent of child labor, the composition of the population—

ethnic and racial groups. Some of this information she will obtain by reading and inquiry prior to the time she starts to work. Much of it, however, she will secure gradually as the opportunity offers after her work has begun. She will need information of state and county resources and how to obtain needed assistance and services of these resources. The facilities and resources of the rural area are not those of the urban center. This must be faced realistically by a worker going into rural work.

It would be unrealistic to expect to find a court dealing with juveniles exclusively. The judge who handles juvenile cases must handle other business of the court. The judge is often the leading citizen of the community as well as a public official. In both his official and his unofficial capacity, his support of the worker is an asset. Much as it is desired, the judge will not always be cognizant of, nor in sympathy with, the newer methods of dealing with young offenders. The worker may have to move slowly and be satisfied with small gains until she has demonstrated her effectiveness and willingness to co-operate with him.

The task of the child-welfare worker in many rural areas is primarily interpretation of services for children, their advantages, and limitations. She will need to explain why she is in the area, what services she has to offer, and how she can give this service. What she needs in the way of help and support from the community must be clearly presented. Her contact with people in a rural community is much closer than it is in the city. The people among whom she works will seek to know her as a person. They will want to know who she is, where she was born, and how she was raised, and unless they accept her, they will probably not accept the work she represents, no matter how well qualified she is professionally. She is professional, yes, but she must be a friend, too. In the city, a worker leaves her clients when she leaves the office at the end of the day. In the country, she lives with her clients, sharing pleasures and work with them.

Traveling great distances modifies the worker's ability to plan her work. Limited or entire lack of supervision places the burden of difficult decisions upon her. She needs to be aware that it is going to be one of her tasks to find ways of helping rural people to feel they know her. It is possible that the worker as a "stranger" will feel herself trapped in isolation until this experience takes place. The worker, with her wide experience and understanding of people, is in a position to bring this about while the rural people themselves may actually be unable to do so.

The rural child-welfare worker is obliged to keep simplicity in her

technique because of inaccessibility of other individuals or organizations with whom she could share responsibility. She must be especially careful of the confidences of her clients. In a community so closely interwoven, private affairs need scrupulous guarding.

The job of the child-welfare worker in a rural community gives her a rare opportunity to see and appreciate the innate courage and dignity of human beings. It takes fortitude and stamina for rural people to withstand privations intensified by violent storms, droughts, blights, and insects. Such assaults may, in a few hours, destroy an entire year's work, crop, and stock. It takes a gallant endurance, energy and vitality to rebuild and start again, to fortify one's home against destruction. Even the normal upkeep of a farm, stock, tools, fences, ample water and fuel supply places heavy responsibility and effort on the rural family.

What the worker accomplishes in a rural setting is the more remarkable because of the imagination, initiative and resourcefulness it represents on the part of the worker. She has to rely on strengths within the family group and to capitalize on them because of the lack of outside resources. She must be alert to every possible constructive opportunity offered through rural home demonstration agents, agricultural extension services, churches, and farm organization.

She must be especially alert to the needs of that one large group of rural folk who are almost in the category of the Forgotten People. These are the migratory agricultural workers. The children of these workers need everything—all the way from decent housing and sanitation to opportunities for health services, education, recreation, and nursery schools. It is not within the power of the child-welfare worker to provide for all their needs, but it is part of her job to interpret the needs of these children to the community where migratory labor is used, and to enlist the efforts of the people in the community to marshal and develop resources for the welfare of these children.

The rural child-welfare worker must take a broad view of her responsibilities and carry them out with courage and conviction. There are romance and challenge in the job. However, she must realize the power for good and for progress which lies within her achievement if she will only allow herself greater vision to permit it full scope.

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WHAT IS A WELFARE PROGRAM FOR CHILDREN?

Before we discuss the planning and provisions of an adequate child-welfare program, it might be well to consider the essential elements of any *total* welfare program.

According to Kenneth L. Pray, Director of the Pennsylvania School of Social Work, in an article appearing in the *Child Welfare League Bulletin*, a total program is one in which there is a planned, concerted effort toward attaining deliberately chosen goals, this being done by selected steps and processes, each related in scope and method to the rest and to the other forces of social change, social construction, and social reconstruction that are at work around us today.

To make the world a better place to live in and to help people find satisfaction and achievement in this world in which they live, seem to be the common goals of all programs in the field of welfare.

Today there is a lack of common concepts in social work. There are large numbers of organizations working side by side but with different philosophies, all doing different things in different ways, all driven by powerful and conflicting inner motivations and by terrific external pressures of time and circumstances, all without clear pictures of specific individual goals and without a clear idea of the means to reach desired ends. However, we must remember that the social welfare movement is still relatively young.

We must remember, also, that in the emergency period of the early 1930's, the State proved able to move from a program of seclusion and security—one serving a limited number of clients who were set apart from the great body of citizens—to one attempting to serve a cross-section of society. It may not have been an ideal program, probably far from it, but it was a step in the right direction. And, today, the State operates in a more enlightened public interest and knowledge, serving those never before considered. For the State is beginning to take the responsibility for the fulfillment of the universal needs and purposes of our whole people.

FUNCTION OF STATE IN CHILD-WELFARE PROGRAM

To carry into effect the outlined general principles* underlying child-welfare work, there is need of certain state machinery. No one pattern of operation can be laid out for all states, and the exact gearing of the machinery may vary with the existing situation. However, there are certain constants in all situations.

For instance, it is nationally recognized that in every state department of public or social welfare there should be a children's division. It is also recognized that this division should have a segregated budget so that money will not be withdrawn from work with children when there are other pressures, and that it should have a child-welfare staff skilled in children's work in order that personnel will not be upset by exigencies and pressures of other programs. There should be close co-ordination between the division of child welfare and other divisions of the state department of public welfare.

The functions of the child-welfare division should be broadly defined to give to it the responsibility for protection and care of homeless, dependent, and neglected children and children in danger of becoming delinquent; for carrying on the regular statutory duties of licensing, inspecting and supervising private and public children's institutions; and for providing adequate child-welfare service, through skilled staff to accomplish the functions mentioned.

The welfare board should have the power to make necessary rules and regulations for carrying out the functions established by law.

There is a difference of opinion as to whether the law which sets up the service should be broadly written, leaving the details to be worked out by the administrative agency, or whether it should be quite specific and detailed. A law that would make possible a wide interpretation of functions and powers and, as far as possible, avoid dealing with mechanics of administration, would have much to commend it. If the law is broadly written as to specification of powers and duties, leaving little question as to the extent and nature of the departments concerned, those responsible for the development of the program can place a much more liberal interpretation on their functions. This plan will prove satisfactory if the department is staffed with well-equipped people who can be relied upon to give sound administration. Any form of organization will result disastrously if not staffed with trustworthy people.

The State Should Lead the Way: There is a strongly marked trend in

*See Chapter I.

public child welfare today to decentralize state functions to a large degree by passing them on to county or district welfare units, and, in some places, town units. The breadth of delegated responsibility should depend upon the demonstrated competence of the child-welfare staff. The unit needs to be large enough to make it feasible for qualified people to be employed. The aim is to bring the direct service as close as possible to the individual child to be served and yet maintain a unit strong enough to provide a high-grade service. Certain functions, as the final recommendations to the court in adoption proceedings and service to institutions and agencies, should remain within the state office until the local unit is adequately staffed with personnel qualified to assume such responsibility. With more complete decentralization, the state's real job becomes more one of leadership, directions and supervision and less of actual administration, except for the administration of state institutions for children. The approach, then, is less authoritative, and is rather one of assistance to the counties.

State training schools for boys or girls should be placed administratively within the division of child welfare. They constitute a source of treatment for the child whose care at home or in the community seems inadvisable, and should be one part of a total child-welfare program. It is of vital importance that institutional programs be related to the broader program of child welfare. Various national agencies and groups have stressed their position in favor of such a plan. These institutions are in no sense penal institutions for the young but should be *treatment* centers and *training* centers for children with serious behavior problems. The after-care, or so-called parole, from these juvenile training schools should be handled by competent workers on the staffs of the respective training schools, since it probably will not be practical for some time to include this work among the functions of a local welfare office.

The division of child welfare, because of its primary concern with the protection of children, should have licensing authority over private agencies whether they are engaged in temporary or permanent placements, or both. These agencies must be of such character that the state division can certify them to license their own boarding homes. When a state authorizes agencies to place children, it should not find it necessary to reinvestigate individual homes used by them or adoptions of children placed by them.

THE STATE AND THE PRIVATE AGENCY

The relationship of the state department to a private agency should

be on a consultant, not a police, basis. While no rule can be laid down regarding the number of visits that should be made during a year, the responsibility of the state department in matters of licensing agencies or institutions should not be met by merely making an annual visit and renewing or refusing to renew an annual license. Consultation should be available at all times to assist agencies and institutions in developing satisfactory standards for care. The public department has responsibility for working with the private child-placing agencies and organizations to effect higher standards of work and improve the quality of personnel.

State-wide private children's agencies, with limited funds and limited staff, need to confer with the state department and work out a joint, realistic program.

Guardianship is not a state function. It should be left with the parents unless they are unfit; but for the child or his family, the best present-day practice is guardianship by the local unit of government rather than the state. If local units of government are not ready to assume this responsibility, the state may well assume it temporarily with the understanding that counties will be certified to do it when they are able. It will prove possible to decentralize guardianship into local units if one's philosophy is toward local services. Certification should be on the basis of personnel qualifications, standards of performance, case loads, *et cetera*. A system of certifying counties to exercise temporary guardianship, with permanent guardianship the responsibility of the state, is too arbitrary and lacking in discrimination.

Private agencies should limit and define their functions. They cannot go on unless there is sufficient interest of the community in their program to supply funds. They should not depend on public funds to carry their program, although they have a right to ask for public funds to do the work for which they are equipped and the local public unit is not.

Prior to 1935, the state's problem was how to induce the county boards to provide a public-welfare or child-welfare unit. Most states provided mandatory laws for its creation but these were of little effect. There was usually no financial assistance from the state. In 1935, nearly all states, however, had laws giving the state some responsibility for the care and protection of children, but in many cases the law had been of little use. This was often due to the fact that the states lacked personnel to carry out the provisions of the law. In many states, the only public service primarily for children on a state-wide basis was a state institution for delinquent, or, perhaps dependent children. Only twenty-six

states had within their state welfare departments a division responsible for conducting or supervising services for children on a state-wide basis.

Alabama led the way in developing correlation between the state and county child-welfare services. It provided the first grant-in-aid to the counties for the administration of truancy laws. The grant was matched by the county. It enabled the county child-welfare commission to provide at least one full-time trained worker for a general child-welfare program in sixty-five out of sixty-seven counties in the state. Only eleven additional states had developed any public services under state leadership.

With the passage of the Social Security Act, the provision regarding grants-in-aid to dependent children and child-welfare services required sweeping changes in the state and county relationship. The federal act required the state to participate financially in a state-wide program and a state agency had to be given the responsibility for effective administration of the program in the state. So, since 1935, the public social services have undergone reorganization and the states are now recognizing and assuming their full and proper responsibilities for the welfare of children.

One of the noticeable improvements is the study and revision now given to state laws relating to children. Now each of the fifty-two state and territorial jurisdictions has recognized in law its responsibility for the welfare and protection of children. Every state and territory has a department of public welfare or a separate division or bureau of welfare in some other state department to carry out welfare functions, including those of child welfare.

The stronger state welfare departments operate on the theory that community planning and community organization constitute a basic responsibility of the state agency.

In approximately half the states, county welfare agencies have fairly broad legal responsibilities for services to children who are dependent, neglected or handicapped. Each of the fifty-two jurisdictions has a plan which includes public child-welfare services provided by local child-welfare workers in at least some of the counties or other local subdivisions.

The child-welfare laws of the state reflect the concern of the citizens for the welfare of their children who, by virtue of their years, do not have a voice in making their wants known or having their needs met. The laws in themselves create beneficial conditions; they define safeguards for those needing special protection and they give authority for administrative action by a public agency. Money is the key to progress in pro-

viding an effective child-welfare program on the state level. Without money, the state cannot use its regulatory powers so as to safeguard the child.

Sound organization of public and private welfare programs would require not only an integration of functions within the public and private agencies—state and local—but of public and private services each with the other, in order that each community may have the best for its children.

Integration means pulling things together, the relating of the various parts to the whole. This, if efficiently done by able staffs, will result in a simplified total welfare program for children, with all-inclusive service provisions.

Operating on the philosophy which demands that the needs of the whole child be met, we recognize the emphasis upon and the unmistakable trend toward the co-ordination of all the forces designed to promote the welfare of the child. Any tendency in over-all planning that tends "to separate off, to isolate or to 'pocket' any one social service program is unsound."* The success of the entire child-welfare program is inextricably interwoven with all programs of social services for all people in need of such services.

The emergence of this philosophy in recent years may account for the rather strong case that is being made for the integration of all public-welfare services. The adequacy of the total public assistance program so directly concerns children that all specific services to children, however sound, cannot make up for a poorly administered inadequate total public assistance program.

Present trends appear to be in the direction of integration of services. Many look with favor upon the establishment of a federal department of welfare with cabinet status, as an essential step toward gearing together all programs through one central federal department concerned with human needs.

The highlights of the proposed platform of the American Public Welfare Association, drawn up at their conference in Baltimore, in December 1946, point up some significant trends which have potent implications for child-welfare services. The platform is based upon the assumption, among others, that public welfare represents a basic guarantee by government of minimum standards of human existence below which no one may be permitted to fall. This means that no person should be

*Arnold, Mildred, "Take Stock of Child Welfare Services," *The Child*, Vol. 11, Aug. 1946, p. 42.

denied benefits because of arbitrary concepts of residence, categorical exclusions, or regional economic inequalities. Therefore it recommends that the states would be assisted by the federal government not only in the categorical aids, but in meeting all residual need without regard to residence, settlement or citizenship requirements; that the federal government bear a larger share of the costs in low-income states through a variable grant formula set up by law; that all aspects of the welfare program in which the federal government participates financially be administered by a single agency at the local, state and federal levels.

Possibly under a unified program, all persons in need of social services, especially children, will be assured of equitable treatment and not merely those who fit into some defined category because they have certain attributes quite apart from the consideration of their needs (e.g., citizenship in old age assistance, residence in aid to dependent children and public assistance, certain residence requirements, in some states, for eligibility for child-welfare services, et cetera).

It is essential that children's needs be portrayed vividly and fearlessly as they cannot do the job themselves. Child-welfare workers must urge people to think and see and understand why social effort, social change, and social legislation in behalf of children are imperative.

Although trends toward better provision for child care antedated the passage of the Social Security Act (1935), the developments in child care since that time exceed in importance the antecedent improvements. However, we still have to meet many needs. "We have never even scratched the surface, in either family or child-welfare services, of this complicated matter of family relationships," according to Mildred Arnold.* This area of family relationships is one that cuts across practically all services in public welfare and is a serious and mounting problem as evidenced by the steadily rising divorce rate.

In the whole philosophy of service for children, the Social Security legislation provides a focal point around which we are able to consider the trends in both public and private services in this field. Currently, we are beginning to focus attention on the total well-being of the child, and to emphasize co-operative planning with courts, schools, public health services, federal and other state and local agencies and departments, as well as private and lay organizations concerned with the welfare of children. In this way, a total over-all program of service for children will be developed.

*Arnold, Mildred, "Take Stock of Child Welfare Services," *The Child*, Vol. 11, Aug. 1946, p. 41.

Examples showing the ways in which a few private and state public agencies have developed and organized services to all children, and for individual needs of particular children, are presented here. First, there are given the child-welfare programs of five states, covering briefly the history of children's services in those states before and after the passage of the Social Security Act in 1935. These are followed by material from five private agencies, revealing how they changed their programs in accordance with the changing needs of children and their communities.

PUBLIC AGENCIES

Alabama: In Alabama, the public-welfare program is built around local autonomy with state supervision. The objective of their program has always been to extend and strengthen local services for children. This kind of administration stems from the underlying philosophy that "if a program is to operate for the people it must be kept close to the people."

As a consequence of this premise upon which the whole public welfare structure of the state is built, Alabama was one of the few states in which local public services for children had been established in every county prior to the passage of the Social Security Act in 1935.

Public responsibility for child-welfare services has actually been required under the laws of the state since 1919 and very progressive laws have been enacted protecting all children who must receive care outside of their homes. The policies of the state department are sound and far-sighted.

The emphasis on conservation of child life began in Alabama in 1887 when a band of socially minded citizens brought about the enactment of a law restricting and regulating the hours of work of children. A counter movement lead to the repeal of this law in 1894, but the proponents of the bill concentrated on obtaining the passage of new child-labor bills and in 1903 the first milestone was reached when a limited child-labor law was passed. Encouraged by this meager bit of legislation, all agencies and individuals interested in the welfare and health of children have continued to work for adequate protection of child labor until Alabama is now one of fourteen states in the United States which has a child-labor law with standards equal to those outlined in the Children's Bureau.

Alabama has made an important contribution to the development of services, not only to her children, but by example to children throughout the Nation.

Indiana: Indiana is one of our most progressive states in total child-welfare program. The program of services for children in Indiana in 1790 gave poor relief to indigent families through overseers of the poor and cared for children away from their own homes in poor asylums or by indenture. By 1889, the creation of the County Board of Child Guardians and the Board of State Charities and Corrections was epic in public plans for care of children. The progressive work in child welfare included passage of a foster home licensing law and recognition of parent-child relationship; also the realization that a qualified staff was necessary. Then in 1936, before some states had advanced as far as Indiana's 1889 record, the passage of the public-welfare act transferred powers and duties of the Board of State Charities and Corrections to a State Board of Public Welfare and made mandatory the establishment in each of ninety-two counties a welfare department with an appointive five-member board. The Child Welfare Division of this Department was organized with the following functions:

- supervision of child-welfare services in the county departments of public welfare;

- licensing and supervising all children's institutions, child-placing agencies, nurseries, and boarding homes for children;

- supervision of dependent and neglected children in foster homes and institutions, especially children placed for adoption and those born out of wedlock, destitute children, and cases of children sent into the state unaccompanied by parent or guardian;

- extension and development of child-welfare services in areas predominantly rural and in areas of special need in co-operation with the U. S. Children's Bureau.

County departments in Indiana have certain well-defined responsibilities for children. The public sensed the need for careful planning in placement of children for adoption and this awareness resulted in the passage of an adoption law in 1941 that assures sound administrative practices. In 1945, the Indiana General Assembly passed a new licensing law. This was an important and sound step in development of better foster care facilities. Institutional care has decreased and those institutions now in existence have improved the quality of their care and for the most part have become a part of the total community child-welfare program. Mental hygiene clinics were organized and traveling clinics were located at strategic points throughout the state so that mental hygiene services might be available through virtually every community. Clinics for crippled children have also been conducted throughout the state. Indiana was also quick to realize the importance of special prepa-

ration for their child-welfare workers and availed themselves of the use of federal child-welfare service funds so that fifty-six state and county child-welfare staff members have been given educational leave at no expense to the state. Indiana is working toward adequate provision for the care of mentally deficient children, services and facilities for some minority groups, and study and treatment homes with sufficient mental and psychiatric facilities to care for mentally ill children.

Mississippi: The growth of private institutional care for dependent children began early in the Mississippi history. The first institution in this group was in Natchez. On February 17, 1819, the second session of the state general assembly granted a charter to this institution.

By 1921, eight private child-caring institutions and agencies had been chartered. These charters were no longer granted directly by the legislature, but in accordance with the law, by the secretary of state with the approval of the governor. Five of these institutions were under the auspices of religious organizations; two under fraternal societies; and one under an agency, primarily for child-placing with the privilege of maintaining a receiving home.

None of these institutions received state funds for support and no provision was made by law for inspection or supervision of the type of care which was offered.

In 1916, almost one hundred years after admission to statehood, the first state institution for children was provided by a law which established the Mississippi Industrial and Training School. This school was for the care and training of children who were found to be destitute, abandoned, or delinquent who were between the ages of seven and eighteen.

Prior to 1936, Mississippi had no central agency of public welfare, nor any board of charities or welfare. What welfare work had been done in the state was largely by public and private institutions and unorganized charities and the churches. It has been said that Mississippi had one advantage and that was, she had no older program to undo. It was, therefore, possible to go forward, while not rapidly, at least with little lost motion.

Late in 1936, the legislature passed an Act to provide for the co-operation by the state with the United States Children's Bureau and secretary of labor in furthering child-welfare services. The Act authorized the Mississippi Department of Public Welfare, created in 1935, to function in developing the plans for this department. It was not until 1938, however, that any action was taken toward developing a plan.

At the regular session of the legislature in 1938, an Act was passed authorizing the State Department of Public Welfare and the county boards of welfare to administer or supervise all child-welfare services concerning dependent or neglected children. This Act placed on the department and the county boards the responsibility of licensing and inspecting all private child-caring institutions and agencies and boarding homes; the supervision of dependent and neglected children in foster homes, especially those placed for adoption, or of illegitimate birth; the supervision of the importation of children; and the supervision of the operation of all state institutions for children.

It was decided to inaugurate a demonstration program in areas that were predominantly rural and most in need of services for the protection and care of children.

Studies were made in selected areas. In preparation for the program, these studies would have a four-fold value. 1. They would give the local child-welfare worker a familiarity with agencies already functioning in the area. 2. They would give a cross section of the problem both as to need and extent. 3. They would give the community a resume of the work that was being done. 4. They would give the community and agencies a picture of what the child-welfare worker could do and how she could help with programs already under way.

In connection with these studies, a general procedure was followed. The study was first made on the invitation of the community. When the study was completed, it was presented in the form of a report, both oral and written, to the interested community groups and the members of the board of supervisors. As a result of this report, usually an invitation was issued to place a child-welfare worker in the community.

In 1940, the legislature passed the first Juvenile Court Law. Although the Law had flaws, it demonstrated the need for a court primarily for children and resulted in passage of the Youth Court Act in 1946. This Act establishes a youth court which will have jurisdiction over neglected and delinquent children. It sets up the youth court in the county court in those counties having county courts and in the chancery court in those counties not having county courts. It provides for the appointments of youth counsellors and further provides that this appointment be made under a merit system. It authorizes counties to expend public funds to provide proper detention facilities.

The Division of Child Welfare is aware that many areas of need of Mississippi children have not been met and the long-time program calls for co-operation with other interested agencies in the elimination of

these handicaps. The program as it has been in operation has been a demonstration of what needs to be done and points the way to further success.

New Hampshire: In New Hampshire, as in many other eastern states, the first manifestations of organized care for children other than institutions came from a private agency. This agency was organized by public-spirited citizens for the purpose of giving protective services to neglected and dependent children. A state department of public welfare was not established until 1937.

The early plan of this department was to have an integrated program. By this, they meant that there would be no specialization, no workers assigned to specific fields as, for example, child welfare. Rather, that all members of the staff would be available for all branches of the work. This did not work well since at times, workers (the staff) found that they were devoting all of their effort to one phase of the work, to the neglect of all the others.

Because of its high standards and its performance of them, much of the court work has been turned over to the probation department. Therefore, a plan was inaugurated for specialized services but close co-operation between these services. For example, the child-welfare worker assumes responsibility in Aid to Dependent Children cases only when the child in the family is to be adopted.

After the establishment of public services in New Hampshire, there seemed to be need for a clear definition of responsibility between the public and private child-welfare agencies. In 1941, a study was made with recommendations which helped to point the way for sound development of the services for children in New Hampshire.

New Hampshire is a small state with comparatively few agencies. Therefore, co-operation is easy and intake policies of all agencies are clearly understood. Through the years of licensing and supervision of the sixteen private child care institutions, a close relationship has grown up between public and private agencies and mutual problems are freely discussed. However, the state welfare department has the following responsibilities to the court:

- investigation of parents who adopt minors;
- investigation of child marriages and guardianship;
- responsibility for delinquent children committed by the courts.

New Hampshire is looking towards the time when it can assure its children five essentials:

1. adequate social services so that home conditions can be improved and fewer children removed from their parents;
2. adequate medical and dental care for all children whose parents are unable to pay;
3. a more diversified school program so that children who have reached their capacity for academic studies can be trained in manual work to prepare them to take their place in the industrial world;
4. extended mental hygiene clinics so that fewer people will become patients at the State Hospital. Vocational guidance for the adolescent;
5. the best type of foster care and supervision for those children who cannot remain with their family or relatives.

Oregon: Oregon was one of the first three states to respond to a recommendation of the first White House Conference in 1909 for care and protection of children when the governor appointed a State Child Welfare Commission on January 7, 1913. The 1919 legislature established a State Child Welfare Commission and appropriated money for administrative purposes. The duties and responsibilities of this Commission were later transferred to the Public Welfare Commission. Since that time, Oregon has continued to show active interest in the well-being of her children through the development of a sound state-wide program of public services to children in their own homes and in foster homes. In developing the program, the Commission has sought and obtained the co-operation of public school systems, health departments, courts and many other groups, both lay and professional.

The State Public Welfare Commission feel that their obligation in administering the child-welfare program is the strengthening of welfare services to all children regardless of race or creed. The discriminating use of specialized facilities for children needing special care is encouraged.

The Negro and non-white population of the state of Oregon is concentrated, with few exceptions in Multnomah County (Portland). Three Negro workers are employed in this county and are assigned to unsegregated district case loads. In certain sections of the state, there are concentrations of Indians and social services are available to them on the same basis as to other persons.

With the exception of the state aid program and the certification of child-caring agencies and institutions, all of the work of the child-welfare program is carried out by the various county public welfare commissions under the supervision and with the consultation of the state child-welfare staff.

In addition to working together toward the development of standards

of care for children who are wards of private agencies, procedures have been developed for co-ordinating the assistance and service facilities of the state and county public welfare commissions and the private agencies for the care of children. To this end, there are working agreements between the public and private agencies. These include the following:

the private agencies may make use of the forwarding center of the State Public Welfare Commission for intra-state and interstate correspondence;

county public-welfare departments will provide on request investigations and social and financial information regarding children committed by the courts or referred for voluntary admission to the private agencies;

on a basis of joint planning with the courts and the private agencies, children may be transferred from the private agencies to the care of the county public welfare commissions or from the public to the private agencies;

all placement reports on adoptions arranged by the private agencies and institutions are filed with the State Public Welfare Commission which prepares and submits the reports uniformly on all adoption petitions to the courts; and

the rules and regulations governing the foster home certifications have been accepted by the private child-caring agencies and institutions as a guide in the selection and supervision of foster homes.

Diagnostic child-guidance services are provided in ten communities by the Child Guidance Clinic Extension of the University of Oregon Medical School. The county public welfare commissions in these ten communities utilize this service and co-operate actively with the clinic but are not responsible for the operation of the service. The same situation prevails in Portland where the Portland Child Guidance Clinic is maintained jointly by the school district, the court of domestic relations, and the University of Oregon Medical School.

The Welfare Commission believes there is need for special facilities for the study and treatment of children with unusual or severe behavior disorders, and an indication of a similar need with respect to chronically ill and mentally deficient children.

Miss Loa Howard, Administrator, believes a state public-welfare agency should, in evaluating its services for children, ask itself these questions:

"Has the agency organized its work so as 1. to keep in sight the special needs of children and conditions of childhood, 2. to maintain basic standards of casework services and assistance to families at a pace with specialized programs and to see to it that the latter make a well-planned

contribution to the support and development of these basic services, 3. to create a close, harmonious relationship between divisions of the organization, state, and local offices, and other state-wide and community resources concerned with the well-being of children?"

PRIVATE AGENCIES

Chicago Orphan Asylum: During the Gold Rush of 1849, cholera caught many of the pioneers in Chicago and left their children homeless. To meet this emergency, the Chicago Orphan Asylum was founded with this definition of purpose: "The object and purpose of the Chicago Orphan Asylum shall be the protecting, relieving, education of and providing means of support for orphans and destitute children in the city of Chicago."

The Chicago Orphan Asylum is the oldest existing welfare agency in Chicago and its history spans many changes in the field of child welfare. In 1949, this agency will have functioned for one hundred years. It began as a pioneer agency to meet the community needs for care for all Chicago children who needed care regardless of race, religion, or social situation. The methods of child care were those approved at that period. During the ensuing years, the orphan asylum has changed its role to meet child-welfare needs in the community.

It has attempted to lead the way in meeting needs of dependent and neglected children. It offered the service which nobody else offered to the child who did not fit any of the programs of other agencies and at the same time tried to raise standards and quality of service.

It experimented with a small receiving home in connection with child-placing service. After eight years, the receiving home was abandoned in favor of more complete reliance upon the program of foster boarding homes which had been developed. The Agency's interest in working with disturbed children caused the community gradually to rely upon them for this care but according to Miss Ethel Verry, the present Executive Secretary, the Agency has "never actually offered highly specialized service to problem children."

About 1939, the Agency embarked upon several additional projects. The first was temporary boarding care of children of unmarried mothers. This program is an outstanding one of temporary care to infants. In connection with this, have been two other projects, the mutual boarding home work with unmarried mothers and adoptions. When it seemed feasible to transfer these programs to other agencies, this was done. In

addition to the above-mentioned projects, the Chicago Orphan Asylum developed foster home convalescent care for children.

The function of this Agency appears now to be one of service confined to selected areas and assumption of a relatively fixed budget. 1. long-time foster home care, 2. temporary care for infants, 3. convalescent foster home care, 4. foster home day care. There is emphasis on long-time planning and experimental service in terms of quality of method of service. The programs of the agency have been in the past responsive to current changing community needs and the Agency has felt responsibility and made a serious effort to meet these needs. A change of name to indicate the Agency's role in the community has been recommended.

The mutual boarding home where unmarried mothers could receive physical care, shelter, and skilled casework was urgently needed. The adoption program was begun because of the lack of adequate service and inflexibility of available non-sectarian adoptive work in the community.

The Diocesan Bureau of Social Service: On January 1, 1916, the Catholic Charitable Bureau was established in Bridgeport, Connecticut. At that time, Bridgeport was developing into a thriving industrial center, and with increased production and population came also many problems of social welfare. "In 1916, the plan of a central office for applications concerning family and child welfare was an extremely hazardous venture," states Miss Katharine E. Griffith, Executive Secretary. One of the greatest concerns of this new organization was that adequate care be given to all dependent children. The first step in provision of care was an agreement by the probate court in Bridgeport to grant to the organization the guardianship of all Catholic children who were without care of their own parents. In 1917, a second development in the field of children's work was the opening of St. Vincent's Day Nursery as a war-time measure to provide care for children of mothers who were employed at munitions making. With this service, the Catholic Charitable Bureau was expanded to become a Catholic Community Center. The National Catholic War Council recommended that some community activities be instituted along with the day nursery service and a program of high school teen-age clubs, and children's and adults' craft and educational classes were developed.

In May 1920, the Diocesan Bureau of Social Service was established on a diocesan-wide basis. The outlines of the Diocese cover the state of Connecticut. The central office is established in Hartford. This agency set up casework services for Catholic families and children as well as casework services to Catholic institutions. In organized Catholic chari-

ties, the Diocese of Hartford is a pioneer. Following its plan of organization, similar plans were developed in other parts of the United States.

In Hartford, two local developments are of interest in services to children under three years of age. Through joint services of the Hartley-Salmon Clinic and the Children's Village, facilities were made available to the agency for psychological testing of children under three. This was particularly advantageous for children who might be adopted. The second development is the functioning of the Committee on Child Care of the Council of Social Agencies through which the agency makes possible an exchange of homes for children recommended for adoption. In addition, this Committee plans united drives for foster homes in which all agencies participated.

The Hartford office also sponsored for a five-year period, the Supervised Homemaker Service of Metropolitan Hartford. This service was available on a non-sectarian basis to all agencies and individuals needing placement in the home of a trained home-maker during illness or convalescence of the mother. During the five-year period, four hundred fifty-seven families used the Homemaker Service. This averted placement of 1,329 children. The limited number of home-makers made it impossible to give this service to all applicants but, in cases where this service could not be provided, the family was referred to a family or children's agency to provide another type of care.

At the conclusion of the five-year sponsorship, it was felt that this program should be incorporated as a permanent feature into the program of a non-sectarian service. As a result of this decision and by mutual agreement, the Supervised Homemaker Service became an integrated part of the program of the Family Service Society on January 1, 1946.

Foremost among the projects to which the branch offices in the state have given serious consideration in the past years are: the placement of children in temporary foster home care, pending return to their homes; placement of infants in temporary study foster-homes prior to permanent placement; determination of conditions under which temporary institutional care seems most advisable; establishing facilities for psychological ratings of infants in two child-caring institutions; helping the unmarried mother in working out a plan for herself and her child in order that both could feel secure in their social relationship; helping parents to a better understanding of themselves and of the needs of their children; assisting in family problems that prevented social breakdown of the home; participation in a co-operative study with the probate courts

and the Division of Child Welfare of the state in the studies of applications for adoption where children were placed independent of any agency action.

A review of the work of the Diocesan Bureau of Social Service shows through the years since its inception, an emphasis on integration of its services into the total community life and planning. It has taken a leading role in matters of social legislation and in urging graduate professional training for social workers. It has also encouraged the participation of volunteer groups in the work of the Bureau. There appears to have been a healthy growth of the agency in meeting the requirements of various groups and individuals who have needed its services.

Children's Service Bureau, Shreveport, La.: The Children's Service Bureau at present, according to Miss Dorothea Gilbert, Director, is a merger of three child-caring groups; two institutions, fifty and thirty-five years old respectively, for dependent children, and a Children's Service Bureau organized in 1937 to provide foster home care for the first time in the community and to serve the children in the older of the two institutions. One of the institutions has been closed; the other has developed its present pattern of temporary home care for children.

The purpose for which this institution is used is stated to be "for a period of study and to permit (children over six years of age) time to make the adjustment away from their own homes and they are then placed in suitable foster homes if these homes are available." The institution is therefore one facility in a program of care for children away from their own homes rather than a distinct form of care in itself.

Children's Service Bureau is the only private child-caring agency in the community and, prior to the establishment of Child Welfare Services of the State Department of Public Welfare, it was the only agency offering care to dependent children. In addition to its other functions, it performed, for a number of years, a special service in making pre-adoption studies for the Department of Public Welfare. Later the need for long-time care of children from permanently broken homes came to be recognized as a public function of a state-wide, tax-supported program. Hence as the State Department of Public Welfare was able to secure qualified workers the Children's Service Bureau released any services that appeared unsound because of duplication. At that time and since, in an effort to adapt its program to changed conditions, the Bureau has developed services to a group of children from homes temporarily disrupted. These children are accepted "regardless of what the social or financial status of the child's parents may be." The limiting factors of

service are primarily that children come from homes where parents are likely to maintain basic family relationships with their children, and that the children are apt to be able to compete successfully in an urban community and in urban schools.

The Children's Service Bureau, as one of its functions, hopes to carry out specialized demonstrations of good practice in new areas of child care and, as the community is able to take over these areas, release them into a public program.

Jewish Children's Bureau, Chicago: The Jewish Children's Bureau is the only Jewish organization in its field in Chicago. In order to understand and appreciate its accomplishments as a consolidated agency in the field of child care, it is necessary, as Miss Mary Lawrence, Associate Executive Director, says, "to pick up the separate but tangled threads of the community program—and follow them along to note the process of untangling and unknotting, the re-tying when breaks occur, and finally the weaving of these threads into the 'consolidated' fabric as it exists today."

In 1924, twenty-three years ago, the need for a more effective organization of Jewish child care for Chicago was advocated. At that time, the three major child-caring agencies were the Marks Nathan Orphans Home, the Chicago Home for Jewish Orphans, and the Jewish Home Finding Society. All were affiliated with the Jewish Charities but functioned independently, except for social investigation of applications, which was done by the Jewish Home Finding Society.

Consideration was given to the advisability of co-ordinating services and it became obvious that the only real solution lay in voluntary consolidation on the part of all the organizations, a casting-aside of the desires of each agency for self-preservation in the interests of the children to be served. After a long period of planning, the new agency, the Jewish Children's Bureau of Chicago, emerged on April 1, 1937. Budgets were consolidated and a board was selected consisting of thirteen members from each of the former Jewish Home Finding Society's and Chicago Home for Jewish Orphans' boards.

The objectives of the consolidated organization were: to receive and care for dependent, neglected, delinquent and physically, socially and mentally handicapped children through the provision of institutional, foster family, housekeeper service, or any other type of facility, care, and service which is deemed best for such children; to provide for adoption when deemed advisable; and to secure medical, social, psychologi-

cal, psychiatric, recreational, religious, and special educational care for children when it is needed, to enable them to become useful citizens.

The consolidated agency now functions along the following lines:

1. "an intake service with skilled social workers to examine applications on the basis of need, and in the light of facilities and resources available;"

2. observation, care and treatment under professional direction carried out in the child's own home, in an institution, or in a foster family.

The field of housekeeper service was pioneered by this agency in 1924. Their housekeeper service is now limited to families from which the mother's absence is permanent.

The program of services for the Jewish unmarried mother and her child has been the full responsibility of this agency since August 1944.

Consolidation has meant for this agency unity and strength.

Ryther Child Center, Seattle: The Ryther Child Center was created in September 1935 by action of the Board of Directors of the Seattle (Wash.) Community Fund. This action was taken upon recommendation of the Welfare Council which, co-operating with the Graduate School of Social Work of the University of Washington, had conducted a survey of child-welfare resources in Seattle.

The Ryther Child Home had been functioning in Seattle for fifty years with Mrs. Sarah Ryther, who came to be known as "Mother Ryther," serving as Executive Secretary during the entire period. In 1919, a large brick building had been built out of contributions which had been raised directly by agency solicitation. Several years later, the Community Fund assumed financial support of the program. The agency carried approximately one hundred dependent children, occasionally admitting a mother and child, and often giving day care only to a child whose mother called for him at night. No foster home placement was attempted, nor was any casework service. "Mother Ryther" died in 1934.

It had been known for several years throughout the United States that the so-called orphanages, such as the Ryther Child Home, were not filled with orphans as the public seemed to believe, but with the children of working mothers. The general trend over the country had been toward spending public money for mothers' pensions to keep children in their own homes instead of spending it for the care of children by strangers in public institutions. Likewise, Seattle had several other institutions for such children as could not be maintained in their own homes. At the same time, it was recognized that, although community funds tended to pro-

vide adequate services for the normal dependent child and the state had set up institutions for the insane, the delinquent, and the feeble-minded, there were not at that time any resources in Seattle for the child who fell in between. During the summer of 1935, the Welfare Council had accumulated some two hundred case histories of children presenting behavior difficulties or emotional problems which made impossible their continued care in their own homes, or their assimilation in any existing institution or available foster home.

These children ranged in age from two to eighteen years and their records reported almost the complete symptomatology of human maladjustment.

As in most social-work planning, the question was not what could be ideally developed for these children, but what might be created out of available community resources and with existing treatment skills. The closing of the old institution released for use both the building and some financial resources which, combined with one or two other small services, made it possible for the Welfare Council to create a new program to attempt to carry out this important function, so the Ryther Child Center came into being. A new board was created, an executive was employed, a modest budget was set up, a staff employed and the building at 4416 Stoneway which had been closed after "Mother Ryther's" death the previous year, was opened as a Treatment Center for children with behavior difficulties. A program of foster home finding was undertaken and the already established intake service to institutions was transferred from the Welfare Council.

At this time, other influences for expanding care for children began operating in the community and these plus the stimulation of the new service by an extremely active welfare council brought about community development more rapidly than had been anticipated. In March of 1936, there was for the first time created a Division of Child Welfare in the King County Welfare Department. Prior to this, only about \$13,000 per year from tax money had been spent in King County for the care of children outside their own homes. So vigorous a program of care for such children was undertaken that by September of 1939 the Division was functioning with a staff of eight professional workers, with a total budget for the year of \$68,000.

The reorganization of the Washington Children's Home Society during this same year made this the logical agency to serve the needs of the normal child, and the foster home care of normal children was discontinued by Ryther Child Center.

This same summer of 1937, a Diocesan Catholic Charities was created, setting up casework services for Catholic dependent children and consequently the casework services to the Catholic institutions such as the Briscoe Boys' School and the Sacred Heart Orphanage, as well as foster home service for normal Catholic children, was transferred to that agency.

In 1939, the employment of a caseworker on the staff of the Seattle Children's Home made possible the relinquishment by the Ryther Child Center of all those auxiliary services which had seemed essential before and now, for the first time, the Ryther Child Center could feel free to concentrate upon what it recognized as its original and primary purpose. Therefore, it was actually not until the year 1939-40 that the agency was able to incorporate within one integrated program, services of sufficient breadth and flexibility so that the multiple needs of emotionally disturbed children could be met within the scope of one agency's operation.

It has added to the social planning services of a typical casework agency (including foster home care) the diagnostic and treatment skills of a child-guidance clinic, plus the operation of a treatment institution, in which children can be in residence until assimilation in the community is possible.

Because the treatment institution is the unique phase of agency service, it tends to take the spotlight, but its effectiveness is dependent upon the fact that it is a tool in treatment to be utilized along with psychiatric service or foster home care, when indicated, in an over-all plan for a child.

The basic purpose of the organization is to provide for the child already subjected to too much pull and haul and too little stability, skilled services which are a part of a unified experience.

The entire philosophy of the agency is oriented to the family as the basic unit of group life and individual growth and consequently all agency functioning from its psychiatric therapy to the operation of the treatment institutions is built around the concept of the family. Although individual loyalties develop, child to child, child to adult, and adult to adult, all culminate in an all-over commitment to "Ryther" as a symbol of valid family life experience.

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VOLUNTEER PARTICIPATION

During any emergency situation—war, fire, flood, or other disaster—more people volunteer to work for their community than at any other time. There are, of course, two obvious reasons for this: first, the personal sense of urgency, self-sacrifice, and responsibility; and, second, the opportunity offered to all people in times of distress to work for their community on equal terms with others.

Another element that enters into the satisfactions of volunteer work during emergencies is the fact that volunteers are assigned to essential tasks. Their time is not wasted on mere "busy work" but devoted to relief of community disaster. There are dignity and interest in doing necessary work and thus becoming a part of important services.

Community loyalty and good-will developed in times of stress should be preserved and redirected to further wholesome and desirable community planning and action.

Under normal conditions, community agencies need the widespread participation of individuals in community service on a volunteer basis. Those who may still think of volunteer service in terms of the "lady bountiful, carrying a basket" should consider the important tasks performed by thousands of volunteers during World Wars I and II. Following wars, inevitably many find less interest and appeal in the idea of volunteer service than they did when a sense of necessity, pressure, and self-denial prevailed. Conversely, many wartime volunteers found new satisfactions in their community activities and did not wish to lose these satisfactions. Wartime publicity in regard to volunteer participation sustained interest.

Many of the communities through the nation have recognized the value of continuing volunteer services. They also recognize that the postwar volunteer program must be broadened to cover a wider range of community service activities than health, welfare, and recreation fields only. It is of interest to note the number of new opportunities opened during wartime for work on community projects which are almost entirely manned by volunteers. Typical are campaigns, surveys, and the like.

In some communities, a permanent volunteer service bureau, created as a central place for the recruitment, registration and guidance of vol-

unteers, is in operation, established as a department of the community welfare council, financed by the Community Chest. In other communities, the volunteer service bureau is an independent agency holding membership in the Community Chest and council, its governing body broadly representative of the whole community.

The role of the volunteer may be individual participation in selected services of an established welfare agency in the community, or working on a project which is community, not agency, centered.

Recruiting volunteers is not an easy matter. The informal method depended upon by most agencies is not always satisfactory, either in producing the number of volunteers needed or in securing the services of those persons best suited for volunteer work. In order to develop a sound program of volunteer service, it is essential that an agency give thought to job classification, delegation of specific jobs to the volunteer, that it decide upon the number of volunteers that can be efficiently used in these jobs, and the number of days per week and hours per day the volunteer should work. It is necessary to plan an orientation course and a training course for volunteer workers, and to select a supervisor of volunteers who is not only adequate in the field of supervision but also sees the value of volunteer services. There should be provision for recognition and promotion within the volunteer ranks.

A placement bureau which will organize recruitment and referral of volunteers on a community-wide basis is effective in handling volunteer services. When community projects are planned, they should provide a service that is actually useful, does not overlap or compete with other established services, has administrative responsibility clearly defined, and official sponsorship guaranteed.

HOW VOLUNTEER SERVICES MAY BE USED EFFECTIVELY

The story of the experience of one county in the use of volunteer services illustrates some of the strengths and weaknesses in such a program.

Since the Fall of 1939, Lane County Welfare Department has used volunteers. The budget was insufficient, and the staff carried loads much heavier than those considered desirable. Realizing that the department was but the agent of the community and that it could only do what the community would let it do, it was decided to share the knowledge gained on the job with the citizens. This would involve seizing every opportunity to tell the secure in the county about the insecure, and finally asking citizens to share with the agency the responsibilities for the inadequacies of the welfare program.

The best way to inform the community was to let citizens work side by side with the staff. During the first five years, at least forty-five women and men in the community and one hundred and thirty university and high school students served with the staff. Their services ranged for two or three individuals from a few hours to three-year periods. Housewives, club women, members of the Junior League, teachers, wives of college professors, college students, and classes from various Sunday schools have participated in the volunteer work of the agency.

Recruiting of volunteers was both a planned part of the program and incidental to doing the job. Among the first volunteers were two boys who were majoring in business administration in the local high school. The agency's office gave them the opportunity to get the one hundred fifty hours of work experience required by the high school for business majors. Each year, two high school students have worked in the office on a volunteer basis.

For several years, the professor of sociology at the university has invited the agency director to speak to his sociology class. Usually several students volunteer as an aftermath of these talks. These student volunteers often bring other students with them. Their time is scheduled with the understanding that if this volunteer work interferes with their studies, the time spent at the agency will be reduced.

Talks made by professional staff members and, in recent years, by some of the volunteers before the League of Women Voters, Junior League, American Association of University Women, parent-teacher associations, church groups, women's clubs and men's service organizations always bring volunteers. Fired with a desire to do something, many women and men with limited ability as well as many highly skilled have come to the agency. A way has been found to use each.

Volunteers are introduced to the work of the department through having a brief history and the objectives of the organization related to them by the director. Policies, as well as the various services offered, are discussed and an effort is made to impress upon the volunteer his responsibility to the agency and to the clients.

In the initial conference between director and volunteer, the mutuality of the arrangement is stressed. It is pointed out that a volunteer is free to withdraw any time; however, previous notice of her intention so to do is expected by the agency. Furthermore, the agency does not consider employing the volunteer should a vacancy in the staff occur.

The confidential nature of the work is always stressed. One of the valued assets of the agency is its reputation in the community for keep-

ing confidences inviolate. Effort is made to answer any questions which may occur to the volunteer and to explain reasons for procedures used. A simple outline of all procedures in the office is kept. Both the agency and the volunteer profit from this material.

What can a volunteer do in a local public agency? They are usually assigned first to some clerical duty in the office. This is because clerical work is a mechanical process which can be more readily understood: the novice sees and handles the records, realizes that work is done on an individual basis and that the financial operations are carefully recorded. She also becomes familiar with technical terms used in the social-work field.

Volunteers may want to do casework with clients; however, most of them have accepted gracefully the explanation made at the beginning of their work that the only persons in the agency equipped to do social casework are those who have had professional training; therefore, the volunteer cannot be permitted to participate in this field.

Many volunteers have become excellent receptionists, learning the names of the clients, putting them at ease and directing them with little lost motion. Several have become so skillful that they can assist in a preliminary interview with the client when the number waiting is great. Many out-of-town inquiries have been investigated and answered by volunteers. The volunteer services were limited to the seemingly less complicated letters.

No secret has been made of the agency's affairs. If the volunteers were in the office when staff meetings were scheduled, the volunteers, as a matter of course, attended along with other members of the staff and participated in the discussions if they so desired.

As a whole, the volunteers have gained understanding of the problems, courage, weaknesses, and limitations of families in the community about whose existence they were formerly only dimly conscious. They know too, that behavior problems occur in children of the banker and the psychiatrist as well as in the children of the section hand and the street cleaner.

If poor interpretation of agency work has been made by volunteers, reports have not resounded. Therefore, it seems probable since they were included in staff meetings, their questions were answered with frankness, and their relationship with staff and clients was at all times characterized by honesty, misinterpretation must necessarily be at a minimum.

Within every community are untouched community resources which could be used if the community was aware of the need. Volunteers can

and do tell the community about the agency and help the agency to do the job more adequately. The work of this agency has gone more smoothly because volunteers made more hands and more brains available to the task.

When the Child Welfare Division of the State Department of Public Welfare, in co-operation with the School of Social Work of the University, established a training unit in this county agency, the supervisor and six graduate students in child welfare fitted smoothly into the agency because the staff had previous experience with volunteer workers and is unruffled by the addition of outside people.

This county agency believes the services which a volunteer can render in agency are limited only by the aptitude and skill of the volunteer and by the planning ability of the staff.

From this one example, and there are many similar ones, it is obvious that the too-small group of professional workers needs the assistance and support of men and women in the community who have time they are willing to give to community services. The need of services for children is so great that volunteer help can be of constant help in carrying out certain functions and expanding the total program.

VOLUNTEERS IN CHILD CARE

Volunteers in child care are being effectively used in all parts of the country—in urban and in rural areas—by agencies and communities that have given thought and direction to programs of volunteer service.

First consideration of the child-welfare agency is what services may be assigned to the volunteer; and here "volunteer" refers to any person who gives services, without pay, to supplement the services of the paid staff. The possibility of volunteer participation depends primarily upon whether there is real constructive work that can be allocated to a volunteer. Since programs of child welfare differ with different agencies and in the various communities, no attempt will be made to specify types of services that can be performed by volunteers. Generally, agencies find that volunteers can work as aides to nurses or supervisors in routine care of children; as playground assistants, library aides, receptionists, office-workers, interpreters of foreign languages; as assistants in publicity programs, and suppliers of transportation.

Additional activities, concerned with the welfare of children, for which volunteers are currently used, are as child-care aide, committee member, hospital aide, librarian, recreation leader; also in sewing, and publicity. Volunteer services may also be used to lead groups in such

things as athletics, hiking, dancing, cooking, puppetry, sketching, music, woodwork and photography. Other opportunities for volunteer services will suggest themselves to alert citizens.

QUALIFICATIONS FOR VOLUNTEERS

It is necessary to establish some broad qualifications for volunteers who are to work with children. Patience and understanding of children and good physical health with emotional balance are always essential, and additional qualifications may be called for by a particular job.

The method used in recruiting volunteers for agencies concerned with the well-being of children, determines to some extent the success of the program. An initial interview with each person wishing to give his services should stress the qualifications for the job. Volunteers need to feel the job is important and constructive; they must be able to accept direction from regular qualified staff members, and also be willing to take delegated responsibilities. A sincere interest in children, calmness, poise, and a pleasant voice are essential in the work with children. Special skills in handicrafts, art, music, story-telling, or playing games are advantageous.

In this initial interview, the mutuality of the arrangement is stressed, and the policies as well as the various services offered are outlined. The responsibility of the volunteer to the agency, the client, and the community, as well as the limitations of the program and the reasons for them, are outlined.

During the interview, it should be possible to determine the suitability of the volunteer for work with children. The importance of this interview is great. It may be that the volunteer who seems to lack ability to work with children can do an excellent job in some other type of volunteer activity. Help should be offered in locating other opportunities for service, so that the volunteer's help will not seem unimportant or unwanted.

ORGANIZED VOLUNTEER TRAINING

A good basic training course to prepare volunteers to work with children should be designed by the agency. Some volunteers may have had previous professional training; others, no former special experience or training in the child-welfare field.

The course should be broad enough to cover a series of lectures or discussion periods including material on physical and mental-health protection, growth and development of wholesome attitudes, social needs of children, and community resources for children. There should be in-

cluded in the course a session for discussion of the role of the volunteer in the agency. There should also be an opportunity for planned field observation visits to other agencies in the community. The content of any course will depend upon local conditions and available leadership and will vary to suit conditions. Background and experience of the volunteers will help to determine the content of the course. An alert supervisor will use every opportunity to help the volunteer develop his potentialities for growth in handling assigned tasks, and to understand the importance of his part in the agency program.

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WHAT IS HAPPENING TO CHILDREN THE WORLD OVER

The children of today are the world's citizenry of tomorrow. From their number will come the world's leaders. As nations, we are daily growing closer together. What happens to children *anywhere* is therefore reflected on children *everywhere*. The fate of the freedoms for which we have fought so bitterly lies in the hands of these children of today.

And what of today's children? What is their heritage?

Perhaps there has been no time in world history when the plight of children has been more deplorable. With all the resources and information at our command, we adults of the present generation have failed to protect the rights of these children; have failed to provide the training, creature comforts, and environment that would fit them to take their place as stable citizens.

As we survey the generation of youngsters that will make tomorrow's decisions throughout the world—political, social, economic, spiritual—what do we see?

There are children all over the world today standing in the wreckage that adults have wrought. They are maimed, orphaned, ragged, starved. Their faces are old and careworn—their bodies stunted. They are resigned to privation, to cruelty. These millions of children come from every economic status and social environment. They know no pride of belonging to family or to nation because their birthrights of creed and nationality have been hurled at them only as evil epithets by the hostile people into whose hands they have fallen. Many of these children were snatched from their homes by invaders and indoctrinated against their own people and hereditary beliefs.

When World War II ended, many were again uprooted in an effort to return them to their homelands. Some resisted returning because they had been taught by their captors to distrust, despise, and dishonor their own countries. Others could find no trace of parents or relatives to shelter them. Many are still listed as displaced persons.

In Europe, in China, and in the Philippines during World War II, millions of children lived through experiences that many an older person would not have survived. They were thrown into camps, numbers

were branded on their arms to remind them for as long as they shall live of the horrors they have known. They were made slave laborers, exploited, threatened, overworked. Too frequently misled sexually and abused in many ways, they have grown to have a contempt of life and too often a yearning for death. The humiliation to which many of them were subjected affects the young very deeply.

Many of them today seek, in vain, their lost identities. Those in some age groups, in some areas, never knew how to laugh and play as children do. Others forgot these childish needs and became full of adult fear and full of adult guile. Their survival from day to day depended upon their ability to lie, cheat and steal. They learned through misery and horror to trust no one fully.

Evidence of malnutrition was found not only in those countries drawn into war, but in neutral countries carried along in the maelstrom of happenings so that they, too, suffered from dwindling rations and increased lack of fuel, clothing, soap, and other commodities. The non-existence of the necessities of life encourages the spread of disease and epidemics. Children suffering from tuberculosis, rickets, scurvy, and other diseases have increased in all countries. The appalling death rate among children of all of these countries has become a matter of grave concern.

For more than five years, thousands of children had no opportunity of going to school. These were the children separated from homes and relatives, who even now have not regained a conception of family life. The first social unit that many of them can remember were the loyalties and emotional ties of a sort that they developed for each other as a gang thrown together by common misfortune.

After the war, many of the children were in no condition to be accepted by foster families, even if there had been enough foster families to carry the load of repatriates—which there were not. So the youngsters back in their homelands took up their new life in institutions, with no prospect of a change to more normal family-life surroundings.

A generation that has lived through such experiences at the most critical stages of child development brings to the consideration of any problem a sense of insecurity, bewilderment, and bitterness. That is their heritage. Training for adult responsibilities not only has been denied them but, owing to the conditions that have been forced upon them, the seeds of hate, distrust, and dishonesty have been planted deep in these children.

It is impossible to give an accurate account of the number of children throughout the world who are in need—the children who are starving

and sick, homeless, mentally ill, emotionally scarred, suffering unbelievable misery and lacking any opportunity for family life, education, or recreation. Only about ten per cent of the children of the world are living in advanced industrial countries which did not suffer directly from the ravages of World War II. Outside of the United States, Canada, Sweden, New Zealand, and Australia, the majority of children in most countries of the world are living under conditions of dire poverty.

The mature population of the world is powerless to change the past or to recompense these children for the hardships they have had to undergo. We must rely on the present to effect such retribution as we can. If we devote as much fierce effort, call upon the same skill in planning and the same amount of energy and initiative in creating a chance for them as we spent in waging the wars that reduced them to their direful state, something may yet be done to start these children on the road to a good future.

We, in the United States, can see to it that the machinery, already set in motion for the improvement of their condition, is kept turning. In planning to give every child his rightful chance, it will be necessary to survey the whole question of child care from a far wider point of view than we have held in the past.

We cannot say, "Oh, those conditions exist in Europe, or in China, or in the Philippines, but they won't affect us here." The people of the United States of America cannot afford to be indifferent to the way children are growing up in countries where medical care is hard to get, where opportunities for schooling are absent or inferior, where there is little interest in the value of recreation.

We must remember that the needs of the world's children are inseparably bound together. This country cannot detach itself from problems concerning the welfare of children throughout the world.

When we are conscious only of the good things that our country should do for its children, we forget that *all* children are *our* children. We cannot be a responsible people with hope that a world order can be developed which will be free from oppression and prejudice unless we work for better standards of child care all over the world.

TEXT OF THE DECLARATION OF GENEVA

The Declaration of Geneva, drawn up by the Save the Children International Union, of Geneva, in 1923, was ratified by the General Council of the Union on February 28, 1924. It has since been adopted in many different countries and, on September 26, 1924, the fifth Assembly of the

League of Nations passed a resolution endorsing the Declaration and inviting states members of the League to be guided by its principles in the work of child welfare.

By the present Declaration of the Rights of the Child, commonly known as the "Declaration of Geneva," men and women of all nations, recognizing that mankind owes to the child the best that it has to give, declare and accept it as their duty that, beyond and above all considerations of race, nationality, or creed:

1. The CHILD should be given the means needed for its normal development, both materially and spiritually.

2. The CHILD that is hungry should be fed; the child that is sick should be helped; the erring child should be reclaimed; and the orphan and the homeless child should be sheltered and succored.

3. The CHILD should be first to receive relief in times of distress.

4. The CHILD should be put in a position to earn a livelihood, and should be protected against every form of exploitation.

5. The CHILD should be brought up in the consciousness that its best qualities are to be used in the service of its fellow men.

UNITED NATIONS APPEAL FOR CHILDREN

The League's successor organization, the United Nations, in December 1946, acted on behalf of children. An International Children's Emergency Fund was established by the United Nations General Assembly on December 11 and the first meeting of the Executive Board of the Fund was held December 19, 1946, in New York City. The policies of the organization are determined by this 26-Nation Executive Board and in accordance with principles laid down by the Economic and Social Council.

Dr. Ludwik Rajchman of Poland, a physician, who for eighteen years had been director of the health organization of the League of Nations, and who initiated the proposal of the establishment of the Fund, was unanimously elected Chairman of the Executive Board. Mr. Maurice Pate, an American businessman, and wartime director of the Prisoners of War Relief Section of the American Red Cross from 1942 to 1946, was appointed Executive Director of the Fund on January 8, 1947. Miss Katharine Lenroot was designated as the United States representative on the Board.

The Fund is to be utilized and administered, to the extent of its available resources, for the following purposes, as defined by the resolution creating it:

- a. for the benefit of children and adolescents of countries which were victims of aggression, and in order to assist in their rehabilitation;

- b. for the benefit of children and adolescents of countries receiving

assistance from the United Nations Relief and Rehabilitation Administration;

c. for child-health purposes generally, giving high priority to the children of countries that were victims of aggression.

Administration of the Fund cannot begin until substantial financial resources are made available to it from contributions given directly to the governments of member nations. The President of the United States asked for a congressional appropriation. A goal was set in 1947 of \$450,000,000, of which at least \$100,000,000 was expected to come from the U. S., for relief of 20,000,000 children and nursing mothers in war-torn countries. It was estimated that 30,000,000 children were in need in European countries and an equal or greater number in China and the Philippines. The actual appropriation by the United States Congress stopped at \$40,000,000. Other governments scaled their contributions to fit that of the United States. Therefore, the funds available from all governmental sources will probably not exceed \$70,000,000. Supplies and services from the countries receiving help would probably bring the total up to approximately \$140,000,000.

First steps toward the creation of this international agency, whose effective operation is of such great importance to the lives and health of children, were taken in Geneva, Switzerland, in August 1946. The Council of the United Nations Relief and Rehabilitation Administration, in session there, was considering the policies to be followed in the winding up of its activities. The members of the Council were anxious about what would happen to the millions of children in Europe and China who had depended upon UNRRA for food and other assistance. Accordingly, a resolution (No. 103) was adopted, authorizing the use of such UNRRA assets as the central committee might determine to be available after completion of the work of UNRRA, for the benefit of children and adolescents. The resolution suggested that such purpose might effectively and appropriately be served by the creation of an International Children's Fund.

In trying to determine upon and provide the environment needed for the youngsters' full development as stable citizens, we realize there are appalling discrepancies between what we know the world's children need to fit them to live happily and securely and what they actually get.

We want children to have comfortable homes, three square meals a day, a place to play, a chance to go to a good school, and to have adequate medical care. These are all good things in themselves and the ability to supply them must be one test of our democracy. But we must

keep a sense of perspective and proportion and see that material things shall not become ends in themselves but shall be considered primarily as means; and that these things and the experiences in home, school, play, and other relationships shall be such as to foster our children's growth into free co-operative human beings.

Nations are now so tied together that none can plan its own tomorrow without having lived for the welfare of the world. We of the older generation have learned this only at the price of great suffering on the part of millions. We have proved ourselves unequal to the task of achieving a world of plenty, freedom from fear, want, disease, and ignorance. We must pass on this task to the youth and children of today and tomorrow. Drawing from the bitter experience of our failure, we of the older generation must do what we can to help them.

We cannot boast of having kept faith with youth when we have subjected it to such great traumas of body and soul. Yet we can try again. In fact, for the good of all, we *must* try for as long as the responsibility is ours. We, as Americans, with such wisdom as we have and with the will and the abundance of our resources, must use our power and influence to strengthen the world community.

We can only hope that this mistreated generation will also have the toughness of fiber to see it through difficulties that we have not been able to meet.

Our government was designed "to promote the general welfare and to secure the blessings of liberty to ourselves and to posterity." In our present highly integrated society, we cannot do this for ourselves and our own without doing it also, in large measure, for those of other nations.

The National Commission on Children in Wartime made a statement in April 1945, that is applicable anywhere any time: "Let us resolve now . . . that we will build courageously, imaginatively, ungrudgingly, and without discrimination as to race, color, creed, or national origin, services which will reach out to all our children and youth wherever they live and whoever their parents may be."

This is the challenge we face as child-welfare workers.

SUPPLEMENTARY READINGS

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American Council on Education, Washington, D. C. 1940.

Friedlander, Walter and Myers, Earl Dewey. *Child Welfare in Germany Before and After Nazism*. The Univ. of Chicago Press, Chicago, Ill. 1940.

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THE CHILDREN'S CHARTER

The 1930 White House Conference on Child Health and Protection, recognizing the rights of the child as the first rights of citizenship, pledged itself to these aims for the Children of America

I For every child spiritual and moral training to help him to stand firm under the pressure of life.

II For every child understanding and the guarding of his personality as his most precious right.

III For every child a home and that love and security which a home provides; and for that child who must receive foster care, the nearest substitute for his own home.

IV For every child full preparation for his birth, his mother receiving prenatal, natal, and postnatal care; and the establishment of such protective measures as will make child-bearing safer.

V For every child health protection from birth through adolescence, including: periodical health examinations and, where needed, care of specialists and hospital treatment; regular dental examinations and care of the teeth; protective and preventive measures against communicable diseases; the insuring of pure food, pure milk, and pure water.

VI For every child from birth through adolescence, promotion of health, including health instruction and a health program, wholesome physical and mental recreation, with teachers and leaders adequately trained.

VII For every child a dwelling place safe, sanitary, and wholesome, with reasonable provisions for privacy, free from conditions which tend to thwart his development; and a home environment harmonious and enriching.

VIII For every child a school which is safe from hazards, sanitary, properly equipped, lighted, and ventilated. For younger children nursery schools and kindergartens to supplement home care.

IX For every child a community which recognizes and plans for his

needs, protects him against physical dangers, moral hazards, and disease; provides him with safe and wholesome places for play and recreation; and makes provision for his cultural and social needs.

x For every child an education which, through the discovery and development of his individual abilities, prepares him for life; and through training and vocational guidance prepares him for a living which will yield him the maximum of satisfaction.

xi For every child such teaching and training as will prepare him for successful parenthood, homemaking, and the rights of citizenship; and, for parents, supplementary training to fit them to deal wisely with the problems of parenthood.

xii For every child education for safety and protection against accidents to which modern conditions subject him—those to which he is directly exposed and those which, through loss or maiming of his parents, affect him indirectly.

xiii For every child who is blind, deaf, crippled, or otherwise physically handicapped, and for the child who is mentally handicapped, such measures as will early discover and diagnose his handicap, provide care and treatment, and so train him that he may become an asset to society rather than a liability. Expenses of these services should be borne publicly where they cannot be privately met.

xiv For every child who is in conflict with society the right to be dealt with intelligently as society's charge, not society's outcast; with the home, the school, the church, the court and the institution when needed, shaped to return him whenever possible to the normal stream of life.

xv For every child the right to grow up in a family with an adequate standard of living and the security of a stable income as the surest safeguard against social handicaps.

xvi For every child protection against labor that stunts growth, either physical or mental, that limits education, that deprives children of the right of comradeship, of play, and of joy.

xvii For every rural child as satisfactory schooling and health services as for the city child, and an extension to rural families of social, recreational, and cultural facilities.

xviii To supplement the home and the school in the training of youth, and to return to them those interests of which modern life tends to cheat

children, every stimulation and encouragement should be given to the extension and development of the voluntary youth organizations.

XIX To make everywhere available these minimum protections of the health and welfare of children, there should be a district, county, or community organization for health, education, and welfare, with full-time officials, coordinating with a state-wide program which will be responsive to a nationwide service of general information, statistics, and scientific research. This should include:

- (a) Trained, full-time public health officials, with public health nurses, sanitary inspection, and laboratory workers
- (b) Available hospital beds
- (c) Full-time public welfare service for the relief, aid, and guidance of children in special need due to poverty, misfortune, or behavior difficulties, and for the protection of children from abuse, neglect, exploitation, or moral hazard.

For every child these rights, regardless of race, or color, or situation, wherever he may live under the protection of the American flag.

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